07/30/2009 15:39

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1.	NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines
Ш	American Hospital Association	1 PAC
1 .		
AD	DRESS (number and street)	325 Seventh Street, NW
	Check if different than previously reported. (ACC)	Suite 700 Washington DC 20004 -
2.	FEC IDENTIFICATION NUM	BER ♥ CITY ★ STATE ★ ZIPCODE ★
	C00106146	3. IS THIS REPORT NEW (N) OR X AMENDED (A)
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Compared on the compared on the	(c) 12-Day Primary (12P) General (12G) Runoff (12R) PRE-Election Report for the: Convention (12C) Special (12G) Election on In the State of
5.	Covering Period 0 8	01 2006 through 08 31 2006
Тур	pe or Print Name of Treasurer	eport and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton ically Filed by Ms. Melinda Hatton Date 0 7 3 0 2 0 0 9
		eous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.
	Office Use Only	FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/104

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

_	Report Covering the Period: From:	01 2006	To: 08 31 2006
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2006 Y Y Y		941820.56
	(b) Cash on Hand at Begining of Reporting Period	944108.85	
	(c) Total Receipts (from Line 19)	170493.72	872231.92
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1114602.57	1814052.48
7.	Total Disbursements (from Line 31)	81841.72	781291.63
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1032760.85	1032760.85
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 104

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

м м 0 8

From:

D D D

2006

Γο:

м м 8 0 ^D 31

^Y ^Y ^Y ^Y ^Y 2006

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. C	ontributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	66780.34	310962.45
	(ii) Unitemized	48318.61	176874.64
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	115098.95	487837.09
(b		0.00	0.00
(c	(such as PACs)	0.00	6666.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	115098.95	494503.09
	ransfers From Affiliated/Other arty Committees	55035.00	373535.00
3. A	Il Loans Received	0.00	0.00
	pan Repayments Received	0.00	0.00
(C	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) efunds of Contributions Made	0.00	0.00
to	Federal candidates and Other olitical Committees	0.00	1500.00
	ther Federal Receipts Dividends, Interest, etc.)	359.77	2693.83
	ransfers from Non-Federal and Levin Funds		
(a	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b	b) Levin Funds (from Schedule H5)	0.00	0.00
(c	r) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	170493.72	872231.92
	otal Federal Receipts ubtract Line 18(c) from Line 19)	170493.72	872231.92

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 104

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	341.72	19650.59
	Expenditures(c) Total Operating Expenditures	041.72	19050.59
	(add 21(a)(i), (a)(ii) and (b))	341.72	19650.59
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	80900.00	725901.00
4.	Independent Expenditure	0.00	35000.04
5.	(use Schedule E)	0.00	0000.04
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
7	Loans Made	0.00	0.00
	Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	600.00	740.00
	(b) Political Party Committees	0.00	0.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	600.00	740.00
	(add Lines 28(a), (b), and (c))	000.00	740.00
9.	Other Disbursements	0.00	0.00
80.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Floation Activity (add		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	81841.72	781291.63
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	81841.72	781291.63

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 104

	FEC FORM 3X (Rev. 02/2003)		
	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	115098.95	494503.09
34.	Total Contribution Refunds (from Line 28(d))	600.00	740.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	114498.95	493763.09
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	341.72	19650.59
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	341.72	19650.59

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 104 (check only one) 11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAGE 1. 11 11 11 11 11 11 11 11 11 11 11 11 1		Date of Receipt
	Mailing Address One Empire Drive		08 02 2006
	City Rensselaer	State Zip Code NY 12144	Transaction ID: 12820566
	FEC ID number of contributing federal political committee.	C C00160259	Amount of Each Receipt this Period 10000.00
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	
Б.	Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAG		Date of Receipt
	Mailing Address One Empire Drive		08 23 2006
	City	State Zip Code NY 12144	Transaction ID: 12892825
	Rensselaer FEC ID number of contributing federal political committee.	NY 12144 C C00160259	Amount of Each Receipt this Period 10000.00
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 60000.00	
- С.	Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal		Date of Receipt
	Mailing Address P.O. Box 15587		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Aust</u> in	State Zip Code TX 78761-5587	Transaction ID: 12899884
	FEC ID number of contributing federal political committee.	TX 78761-5587 C C00301325	Amount of Each Receipt this Period 4800.00
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 71800.00	
	SUBTOTAL of Receipts This Page (optional)		24800.00
-	TOTAL This Period (last page this line number	·	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	ntomonto mon	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 104 (check only one) 11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the report NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial)	name and add	y not be sold of used by any person dress of any political committee to	solicit contributions from such committee.
A.	California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City Sacramento	State CA	Zip Code 95814	Date of Receipt M M
	FEC ID number of contributing federal political committee. Name of Employer		0237495	25000.00
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 105000.00	
В.	Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal Mailing Address Post Office Box 8600			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Harrisburg FEC ID number of contributing federal political committee.	State PA C C00	Zip Code 17105-8600 0128082	Transaction ID: 12988192 Amount of Each Receipt this Period 5235.00
	Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	e Year-to-Date ▼ 75235.00]

SUBTOTAL of Receipts This Page (optional)	•	30235.00
TOTAL This Period (last page this line number only)	•	55035.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠	Full Name (Last, First, Middle Initial) Mr. David H. Wiesman Mailing Address 4521 Hickory Grove Bl City	vd. State Zip Code	Date of Receipt M M M
	Greenwood	IN 46143-7448	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Indiana Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Greg W Lintjer Mailing Address 53308 Monticola Ln.		Date of Receipt 0 8 1 4 2 0 0 6
	City	State Zip Code	Transaction ID: 12852508
	Bristol	IN 46507-9692	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Elkhart General Hospital	Occupation Hospital President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Robert E. Morr, Jr. Mailing Address 5227 North Washingto	n Boulevard	Date of Receipt 0 8 1 4 2 0 0 6
	City	State Zip Code	Transaction ID: 12852596
	Indianapolis	IN 46220-3060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Indiana Hospital&Health Association	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE ITEMIZED F	A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 104 (check only one) X
or for commercial NAME OF CO	opied from such Reports and St purposes, other than using the MMITTEE (In Full) ospital Association PAC	atements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Las Mrs. Bernice C.	st, First, Middle Initial)	errace		Date of Receipt
City	Tood Halling Brook H	State	Zip Code	0 8 1 4 2 0 0 6 Transaction ID: 12852598
Greenwood FEC ID numbe federal political	er of contributing committee.	C	46143-9255	Amount of Each Receipt this Period 250.00
Name of Empli Indiana Hospit ion Receipt For: Primary Other (sp	General	Occupatio Vice Pres Aggregate		
Mr. Charles H N	st, First, Middle Initial) Mason, , Jr. s 6402 Cherry Hill Parkw	Date of Receipt 0 8 1 4 2 0 0 6		
City		State	Zip Code	Transaction ID: 12852610
Fort Wayne FEC ID numbe federal political	er of contributing committee.	C	46835-9637	Amount of Each Receipt this Period 500.00
Name of Emplo Parkview Hosp	oyer ital	Occupatio Presiden		
Receipt For: Primary Other (sp	General pecify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Las Mr. Kenneth G.	st, First, Middle Initial) Stella			Date of Receipt
Mailing Addres	s 4671 Bedford Court			08 14 2006
City		State	Zip Code	Transaction ID: 12852619
Carmel FEC ID number federal political	er of contributing committee.	C	46033-4647	Amount of Each Receipt this Period 500.00
Name of Emplo Indiana Hospit Association	oyer al&Health	Occupatio Presiden	t	
Receipt For: Primary Other (sp	General pecify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of R	eceipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 104 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Spencer L. Grover		Date of Receipt
Mailing Address 3636 Emily Way		08 14 2006
City	State Zip Code	Transaction ID: 12852642
Carmel	IN 46033-4442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Indiana Hospital Associat-	Occupation Vice President	
ion Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Timothy A Flesch	1	Date of Receipt
Mailing Address 336 Lant Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12852647
Evansville	IN 47715-3400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Mary's Medical Center of Evansvill	Occupation Hospital CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Allison D. Wharry	<u> </u>	Date of Receipt
Mailing Address 4636 St. John Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12852689
Zionsville	IN 46077-8140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Indiana Health&Hospital Association	Occupation Director, Health Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 104 (check only one) X
An	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <u></u>	Full Name (Last, First, Middle Initial) Mr. Al Allee Mailing Address 319 E Josephine		Date of Receipt
	City	State Zip Code	0 8 1 8 2 0 0 6 Transaction ID: 12888254
	Frederick FEC ID number of contributing federal political committee.	OK 73542-2220	Amount of Each Receipt this Period 65.05
	Name of Employer Memorial Hospital and Physician Group Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 565.05	
3.	Full Name (Last, First, Middle Initial) Mr David Blackmon Mailing Address P O Box 129		Date of Receipt 0 8 1 8 2 0 0 6
	City	State Zip Code	Transaction ID: 12888257
	Lawton FEC ID number of contributing federal political committee.	OK 73502-0129	Amount of Each Receipt this Period 275.00
	Name of Employer Comanche County Memorial Hospital Receipt For:	Occupation Chief Financial Officer	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00]
	Full Name (Last, First, Middle Initial) Dr. James Ireland, M.D. Mailing Address PO Box 129		Date of Receipt
		01-1- 7'- 0-1-	08 18 2006
	City Lawton	State Zip Code OK 73502-0129	Transaction ID: 12888266 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Comanche County Memorial Hospital	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SI	UBTOTAL of Receipts This Page (optional)		590.05

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 104 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Rex Jones Mailing Address P O Box 1038 City	State	Zip Code	Date of Receipt M M
Okmulgee FEC ID number of contributing federal political committee.	OK C	74447-1038	Amount of Each Receipt this Period 250.00
Name of Employer Okmulgee Memorial Hospital Receipt For: Primary General Other (specify) ▼		ecutive Officer e Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Lex Smith Mailing Address P O Box 129			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City El Reno FEC ID number of contributing	State OK	Zip Code 73036-0129	Transaction ID: 12888273 Amount of Each Receipt this Period 125.00
Receipt For: Primary Other (specify)	Occupatio Chief Exc	n ecutive Officer e Year-to-Date 375.00]
Full Name (Last, First, Middle Initial) Mr Douglas K Weaver Mailing Address 3401 W. Gore Blvd			Date of Receipt M M M / D D / Y Y Y Y Y
City Lawton FEC ID number of contributing federal political committee.	State OK	Zip Code 73505	0 8 1 8 2 0 0 6 Transaction ID: 12888274 Amount of Each Receipt this Period 250.00
Name of Employer Comanche County Memorial Hospital Receipt For: Primary General Other (specify) ▼		erating Officer Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional	l)		625.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 104 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and ad	l y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC	,		
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker			Date of Receipt
Mailing Address 7800 South Eagle F	load		08 17 2006
City Columbia	State MO	Zip Code 65203-9017	Transaction ID: 12888389 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		27.78
Name of Employer Missouri Hospital Associa- tion	Occupatio Senior V	n P, Commc. & Health Improv	rement
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 222.24	
Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine Mailing Address 12675 Riviera Heigh	nts Road		Date of Receipt
City	State	Zip Code	0 8 1 7 2 0 0 6 Transaction ID: 12888392
Holts Summit	MO	65043-2039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		111.12
Name of Employer Missouri Hospital Associa- tion	Occupatio Sr. Vice	n President, Health Policy	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		888.96	
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff	'		Date of Receipt
Mailing Address 5119 Coventry Way	е		08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12888399
Jefferson City FEC ID number of contributing federal political committee.	C	65101-8284	Amount of Each Receipt this Period 27.78
Name of Employer Missouri Hospital Associa- tion	Occupatio Senior V	n ice President & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 222.24	
			166.68

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 104 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Jerry M. Sill, J.D.			Date of Receipt
Mailing Address 2906 Valley View		7:- Oada	08 17 2006
City Jefferson City	State MO	Zip Code 65109-1069	Transaction ID: 12888403 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	27.78
Name of Employer Missouri Hospital Associa- tion		President & General Cou	nse
Receipt For: Primary General Other (specify) ▼	Aggregate Yo	ear-to-Date ▼ 222.24	
Full Name (Last, First, Middle Initial) Mr. Marc D. Smith Mailing Address 5612 Tanner Bridg	e Road		Date of Receipt
City	State	7in Codo	08 17 2006
Jefferson City	MO	Zip Code 65101-8275	Transaction ID: 12888404 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		111.12
Name of Employer Missouri Hospital Associa- tion	Occupation President a	nd Chief Executive Office	·
Receipt For: Primary General Other (specify) ▼	Aggregate Yo	ear-to-Date ▼ 888.96	
Full Name (Last, First, Middle Initial) Ms. Carmela S. Coyle	'		Date of Receipt
Mailing Address 6820 Deerpath Ro	ad		08 17 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12888416
Elkridge	MD	21075-6200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Maryland Hospital Associa- tion Peccipt For:	Occupation President a		
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	al)		1138.90
TOTAL This Period (last page this line nur	nber only))	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	5X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/104 (check only one)
Any information copied from such Reports or for commercial purposes, other than using	and Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association Pa		aress or any political committee to	Solicit Contributions from Such Committees.
Full Name (Last, First, Middle Initial) Mr. William D Petasnick			Date of Receipt
Mailing Address 1848 Hidden Res	erve Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Mequon</u>	State WI	Zip Code 53092-5566	Transaction ID: 12888419 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Froedtert Memorial Luther- an Hospital	Occupation Presiden	n t and Chief Executive Office	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mrs. Rosemari Davis			Date of Receipt
Mailing Address 2700 SE Stratus			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McMinnville	State OR	Zip Code	Transaction ID: 12888643
FEC ID number of contributing federal political committee.	C	97128-6255	Amount of Each Receipt this Period 275.00
Name of Employer Willamette Valley Medical Center	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Mr. Marvin Haas			Date of Receipt
Mailing Address 2650 Siskiyou Blv	⁄d.		08 17 2006
City Medford	State OR	Zip Code 97504-8170	Transaction ID: 12888644 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Asante Health System	Occupation Vice Pres	n sident, Finance	
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optio			1525.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 16 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and Si r for commercial purposes, other than using the	tatements may not be name and address o	e sold or used by any person f any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>∠</u> A.	Full Name (Last, First, Middle Initial) Mr. Roy G Vinyard, , FACHE			Date of Receipt
	Mailing Address 2650 Siskiyou Blvd, Su			08 / 17 / Y Y Y Y Y
	City Medford		p Code 7504-8170	Transaction ID: 12888648 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Asante Health System	Occupation President and	Chief Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 550.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Mark Folger			Date of Receipt
	Mailing Address 2519 Meadowcreek Dri	ive		0 8
	City		p Code	Transaction ID: 12888649
	Medford FEC ID number of contributing federal political committee.	OR 9	7504-3666	Amount of Each Receipt this Period 430.00
	Name of Employer Asante Health System	Occupation Executive Vice	President	
	Receipt For: Primary General Other (specify)	Aggregate Year-t	o-Date ▼ 430.00	
—).	Full Name (Last, First, Middle Initial) Mr. Larry A Mullins, FACHE			Date of Receipt
	Mailing Address P O Box 1068			08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Corvallis		p Code	Transaction ID: 12888651
	FEC ID number of contributing federal political committee.	C	7339-1068	Amount of Each Receipt this Period 225.00
	Name of Employer Samaritan Health Services	Occupation President and	Chief Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 225.00	
Ę	SUBTOTAL of Receipts This Page (optional)			955.00
	FOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 104 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	itatements may	not be sold or used by any perso tress of any political committee to	13 14 15 16 16 17 18 19 19 19 19 19 19 19 19 19 19 19 19 19
NAME OF COMMITTEE (In Full) American Hospital Association PAC	mamo and doc	areas of any pointed committee to	
Full Name (Last, First, Middle Initial) Mr. Richard Cagen			Date of Receipt
Mailing Address 1235 NE 47th Avenue Suite 299			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12888652
Portland	OR	97229-8087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Providence Health System	Occupation Chief Exe	n ecutive Officer-Portland Area	a l
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Ms. Lucille C. Giddings	1		Date of Receipt
Mailing Address 57 Prospect Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12888660
Nantucket	MA	02554-4345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Nantucket Cottage Hospital	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Alan G. MacDonald			Date of Receipt
Mailing Address 92 Bacon Street			08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12888661
Winchester	MA	01890-2638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Hallmark Health System	Occupation Chairman	n n of the Trustees	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
			750.00

Mailing Address 920 Glenneyre Street Suite #2 City Laguna Beach CA 92651-2740 FEC ID number of contributing federal political committee. Name of Employer St. Rose Hospital Full Name (Last, First, Middle Initial) FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ State Zip Code City Columbus FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 12888662 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Date of Receipt Name of Employer St. Francis Hospital Primary General Chief Executive Officer Receipt For: Chief Executive Officer Aggregate Year-to-Date ▼ Primary General Chief Executive Officer Aggregate Year-to-Date ▼ Primary General Chief Executive Officer Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)		SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Sta	atements may	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 18 / 104 (check only one) X
A. Mr. Nathan O. Risenberg Mailing Address 920 Glenneyre Street Sulte #2 City State Zip Code Laquina Beach CA 92651-2740 FEC ID number of contributing federal political committies. Name of Employer Mailing Address P O Box 7000 City State Zip Code Columbus GA 31998-7000 FEC ID number of contributing federal political committies. Name of Employer St. Francis Hospital Columbus GA 31998-7000 FEC ID number of contributing federal political committies. Name of Employer St. Francis Hospital Other (specify) ▼ Columbus GA 31998-7000 FEC ID number of contributing federal political committies. Name of Employer St. Francis Hospital Other (specify) ▼ State Zip Code Chief Executive Officer Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. James McLaughlin Hobson Mailing Address 2525 De Sales Avenue City State Zip Code Chattanooga TN 37404-1161 FEC ID number of contributing federal political committee. Committee Committee Coupation President and CEO Name of Employer Name of		NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	solicit contributions from such committee.
Suite #2 City	A.	Mr. Nathan O. Rosenberg			M M / D D / Y Y Y Y
Laguna Beach CA 92651-2740 Amount of Each Receipt this Period		Suite #2	Ctata	Zin Codo	
FEC ID number of contributing lederal political committee. Name of Employer St. Rose Hospital B. Full Name (Last, First, Middle Initial) Mr. Robert P Granger Mailing Address P O Box 7000 City State Zip Code GA 31908-7000 FEC ID number of contributing federal political committee. Name of Employer St. Francis Hospital C. Cocupation Mill Name (Last, First, Middle Initial) Mr. Robert P Granger Mailing Address P O Box 7000 City State Zip Code GA 31908-7000 FEC ID number of contributing federal political committee. Name of Employer St. Francis Hospital C. Mill Name (Last, First, Middle Initial) Mill Name McLast, First, Middle Initial Mill Name McLast,				·	
Receipt For:		FEC ID number of contributing		020012710	
Primary General Cither (specify) ▼ State Zip Code GA 31908-7000		Name of Employer St. Rose Hospital			
M. Robert P Granger Mailing Address P O Box 7000 City State Zip Code GA 31908-7000 FEC ID number of contributing federal political committee. Name of Employer St. Francis Hospital Chattanooga City State Zip Code Transaction ID: 12891967 Amount of Each Receipt this Period Part of Executive Officer Aggregate Year-to-Date ▼ City State Zip Code Chief Executive Officer Political committee. Date of Receipt For: Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Period Part of Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Period Part of Receipt Amount of Each Receipt this Period Date of Receipt Amount of Each Receipt this Period Part of Receipt Amount of Each Receipt this Period City State Zip Code Transaction ID: 12892003 Amount of Each Receipt this Period Part of Receipt For: Part of Re		Primary General	Aggregate		
City State Zip Code GA 31908-7000 FEC ID number of contributing federal political committee. Name of Employer St. Francis Hospital Chief Executive Officer Receipt For: Primary General Other (specify) ▼	- В.				Date of Receipt
Columbus GA 31908-7000 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer St. Firancis Hospital Other (specify) ▼ Cocupation Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Coty State Zip Code Chattanooga TN 37404-1161 FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System Receipt For: Receipt For: Aggregate Year-to-Date ▼ Transaction ID: 12892003 Amount of Each Receipt this Period Date of Receipt Transaction ID: 12892003 Amount of Each Receipt this Period Date of Receipt Transaction ID: 12892003 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System President and CEO Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Mailing Address P O Box 7000			
FEC ID number of contributing federal political committee. Name of Employer St. Francis Hospital Receipt For: Primary General Other (specify) ▼ C. Full Name (Last, First, Middle Initial) Mr. James McLaughlin Hobson Mailing Address 2525 De Sales Avenue City State Zip Code Than 37404-1161 FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System Receipt For: Primary General Other (specify) ▼ Occupation President and CEO Aggregate Year-to-Date ▼ Occupation President and CEO Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation President and CEO Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Docupation President and CEO		•		•	
St. Francis Hospital Chief Executive Officer Receipt For: Primary General Other (specify) ▼ C. Mr. James McLaughlin Hobson Mailing Address 2525 De Sales Avenue City State Zip Code Chattanooga TN 37404-1161 FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System Receipt For: Primary General Other (specify) ▼ Occupation President and CEO Aggregate Year-to-Date ▼ Occupation President and CEO Aggregate Year-to-Date ▼ 250.00		FEC ID number of contributing		31908-7000	
C. Full Name (Last, First, Middle Initial) Mr. James McLaughlin Hobson Mailing Address 2525 De Sales Avenue City Chattanooga TN 37404-1161 FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Name of Employer St. Francis Hospital			
Mailing Address 2525 De Sales Avenue City State Zip Code Transaction ID: 12892003 Chattanooga TN 37404-1161 FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M O D D O V Y Y O Y O O O O O O O O O O O O O O		Primary General	Aggregate	1 1 1 1 1 1 1	
City Chattanooga TN 37404-1161 FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 12892003 Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date ▼ 250.00	С. С.	,			Date of Receipt
Chattanooga TN 37404-1161 Amount of Each Receipt this Period C 250.00 Name of Employer Memorial Health Care System President and CEO Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date ▼ 250.00		Mailing Address 2525 De Sales Avenue			
FEC ID number of contributing federal political committee. Name of Employer Memorial Health Care System President and CEO Receipt For: Primary General Other (specify) Occupation President and CEO Aggregate Year-to-Date 250.00		•		•	Transaction ID: 12892003
Name of Employer Memorial Health Care System em Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date 250.00			TN	37404-1161	Amount of Each Receipt this Period
Memorial Health Care System Receipt For: Primary General Other (specify) ▼ President and CEO Aggregate Year-to-Date ▼ 250.00			С		250.00
Primary General Other (specify) ▼ 250.00		em			
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
		SUBTOTAL of Receipts This Page (optional)		_	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports at	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 104 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Douglas C Keir Mailing Address 521 Hill Street SW		Date of Receipt
City	State Zip Code	0 8 2 3 2 0 0 6 Transaction ID: 12892041
Thomson	GA 30824-2118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	255.00
Name of Employer McDuffie Regional Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) Dr. Alan D. Kirsh, MD		Date of Receipt
Mailing Address 777 Hemlock Stree	t	08 23 7 2006
City Macon	State Zip Code GA 31201-2102	Transaction ID: 12892050
FEC ID number of contributing federal political committee.	C 31201-2102	Amount of Each Receipt this Period 250.00
Name of Employer Medical Center of Central Georgia	Occupation Director, Radiology	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. H Scott Kroell, , Jr.		Date of Receipt
Mailing Address P O Box 919		08 23 YYYYY 2006
City	State Zip Code	Transaction ID: 12892055
<u>Hinesville</u>	GA 31310-0919	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Liberty Regional Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)	755.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 104 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Lamar Lyle Mailing Address Post Office Box 44			Date of Receipt
City <u>Dalton</u> FEC ID number of contributing	State GA	Zip Code 30722-0044	0 8 2 3 2 0 0 6 Transaction ID: 12892070 Amount of Each Receipt this Period 500.00
Name of Employer Hamilton Medical Center Receipt For: Primary General Other (specify)	Occupatio Board Ch		
Full Name (Last, First, Middle Initial) Mr. Eric P Norwood Mailing Address 2701 North Decatur	Road		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12892129
Decatur FEC ID number of contributing federal political committee.	GA C	30033-5918	Amount of Each Receipt this Period 250.00
Name of Employer DeKalb Medical Center Receipt For: Primary General Other (specify)		n t and Chief Executive Officer e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Rhett C. Partin Mailing Address Route 2 Box 3425			Date of Receipt
Mailing Address Route 2 Box 3425			08 23 2006
City Nashville	State GA	Zip Code 31639-9537	Transaction ID: 12892139 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31039-9337	250.00
Name of Employer Georgia Hospital Associat- ion Receipt For:		n e Director, The Center for Ru e Year-to-Date ▼	ır
Primary General Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Diane J. Patrick Mailing Address 901 East 18th Street City Tifton FEC ID number of contributing federal political committee. Name of Employer Tift Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code GA 31794-3648 C Occupation Vice President, Patient Care Services Aggregate Year-to-Date 250.00	Date of Receipt M M 23 2006 Transaction ID: 12892143 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. J Larry Read Mailing Address 1350 Walton Way City Augusta FEC ID number of contributing federal political committee. Name of Employer University Health Care System	State Zip Code GA 30901-2612 C Occupation President and Chief Executive Officer	Date of Receipt M M / D D / Y Y Y O O 6 Transaction ID: 12892163 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. William T Richardson Mailing Address Drawer 747 City Tifton FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼ 500.00 State Zip Code GA 31793-0747 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Tift Regional Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 104 (check only one) X 11a 11b 11c 12
Annier formation assisted from a scale Describe and		13 14 15 16
or for commercial purposes, other than using the	Statements may not be sold or used by any person name and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of any political committee to the same and address of the same address of the same and address of the same address o	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. J. Thomas Shepherd		Date of Receipt
Mailing Address 164 Eagle Ridge Driv	е	08 23 2006
City	State Zip Code	Transaction ID: 12892196
<u>Eastman</u>	GA 31023-3807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Gwinnett Medical Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Kurt Stuenkel, , FACHE		Date of Receipt
Mailing Address P O Box 233		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12892215
Rome	GA 30162-0233	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Floyd Medical Center	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joel Wernick		Date of Receipt
Mailing Address 417 Third Avenue		08 / 23 / Y Y Y Y Y
City	State Zip Code	Transaction ID: 12892248
Albany	GA 31701-1943	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Phoebe Putney Health Syst- em	Occupation President and Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	500.00	
	1	

ITEMIZED RECEIPTS	ν)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23/104 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Philip Wolfe			Date of Receipt
Mailing Address 2716 Wynnton Drive	е		08 23 2006
City	State	Zip Code	Transaction ID: 12892262
Duluth FEC ID number of contributing federal political committee.	GA C	30097-3706	Amount of Each Receipt this Period 250.00
Name of Employer Gwinnett Medical Center	Occupatio Chief Ex	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Charles T Adams	I		Date of Receipt
Mailing Address P O Box 589			0 8 2 3 2 0 0 6
City Royston	State GA	Zip Code 30662-0589	Transaction ID: 12892270
FEC ID number of contributing federal political committee.	C	30002-0309	Amount of Each Receipt this Period 250.00
Name of Employer Ty Cobb Healthcare System,	Occupatio	n ecutive Officer	
Inc. Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. Michael Alexander			Date of Receipt
Mailing Address P O Box 655			M M / D D / Y Y Y Y Y O O O O
City	State	Zip Code	Transaction ID: 12892275
Bremen FEC ID number of contributing federal political committee.	GA C	30110-0655	Amount of Each Receipt this Period 125.00
Name of Employer Higgins General Hospital	Occupatio Administ		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	1)		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 104 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	onanio and addisce of any pointed committee to	oonot continued in 1811 odd in 3011 interes.
Full Name (Last, First, Middle Initial) Ms. Vivian Austin		Date of Receipt
Mailing Address 10 Shorecrest Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12892280
Savannah	GA 31410-1054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Joseph's/Candler, Can- dler Hospital	Occupation Nursing Supervisor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Donald R Avery, , FACHE	1	Date of Receipt
Mailing Address P O Box 1408		08 23 YYYYY 2006
City	State Zip Code	Transaction ID: 12892281
<u>Dublin</u>	GA 31040-1408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fairview Park Hospital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Gilbert A. Banks	1	Date of Receipt
Mailing Address P. O. Box 1383		08 23 YYYYY 08 23 2006
City	State Zip Code	Transaction ID: 12892286
Forsyth	GA 31029-1383	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Monroe County Hospital	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	1	750.00

City State Zip Code GA 31792-6113 FEC ID number of contributing federal political committee. Name of Employer Archbold Medicial Center Primary General Other (specify) ▼ FUII Name (Last, First, Middle Initial) Name of Employer Riverdale Road SW City State Zip Code GA 30274-2600 FEC ID number of contributing federal political committee. Pagregate Year-to-Date ▼ Transaction ID: 12892305 Amount of Each Receipt this Pere Southern Regional Medical Center Name of Employer Southern Regional Medical Center Name of Employer Southern Regional Medical Center Receipt For: Primary General Occupation President and Chief Executive Officer Receipt For: Primary General Occupation President and Chief Executive Officer Receipt For: Primary General Occupation President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. O.J. Booker Mailing Address P O Box 1068 City State Zip Code Mailing Address P O Box 1068 City State Zip Code Forsyth GA 31029-1068 Transaction ID: 12892313 Amount of Each Receipt this Pereceipt Transaction ID: 12892313 Amount of Each Receipt this Pereceipt Transaction ID: 12892313 Amount of Each Receipt this Pereceipt Transaction ID: 12892313 Amount of Each Receipt this Pereceipt Transaction ID: 12892313 Amount of Each Receipt this Pereceipt Transaction ID: 12892313	12 16 17	\vdash \vdash \vdash	Use separate schedule(s) for each category of the Detailed Summary Page	X)	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	
A. Mr. Ken B. Beverly Mailing Address 910 South Broad Street City State Zip Code Thomasville GA 31792-6113 FEC ID number of contributing federal political committee. Name of Employer Southern Regional Medical Center President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ State Zip Code GA 30274-2600 FEC ID number of contributing federal political committee. Date of Receipt Aggregate Year-to-Date ▼ Transaction ID: 12892315 Amount of Each Receipt this Period Receipt For: Primary General Other (specify) ▼ State Zip Code GA 30274-2600 FEC ID number of contributing federal political committee. Name of Employer Southern Regional Medical Center Receipt For: Primary General Other (specify) ▼ State Zip Code GA 31029-1088 Forsyth GA 31029-1088 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ Date of Receipt Date of Receipt Transaction ID: 12892312 Amount of Each Receipt this Period Receipt For: Primary General Other (specify) ▼ Date of Receipt Date of Receipt Transaction ID: 12892312 Amount of Each Receipt this Period Receipt For: Primary General Other (specify) ▼ State Zip Code GA 31029-1088 FEC ID number of contributing federal political committee. City State Zip Code GA 31029-1088 FEC ID number of contributing federal political committee. City State Zip Code GA 31029-1088 FEC ID number of contributing federal political committee. City Fransaction ID: 12892313 Amount of Each Receipt this Period Receipt For: Primary General	ibutions mittee.	for the purpose of soliciting contributions olicit contributions from such committee.	not be sold or used by any person dress of any political committee to	g the name and add	or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	or for com
Thomasville FEC ID number of contributing federal political committee. Name of Employer Archbold Medical Center Receipt For: Primary General Occupation President and Chief Executive Officer Primary General Other (specify) ▼	^Y 2 0 0 6	08 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			Mr. Ken B. Beverly Mailing Address 910 South Broad Str	Mr. Ken Mailing
FEC ID number of contributing federal political committee. Name of Employer Archbold Medical Center Receipt For: Primary General Other (specify) ▼			•		-	-
Archbold Medical Center Receipt For:	Period 500.00		31/92-6113		FEC ID number of contributing	FEC ID
Mr. Edward J Bonn Mailing Address 11 Upper Riverdale Road SW City State Zip Code Riverdale GA 30274-2600 FEC ID number of contributing federal political committee. Name of Employer Southern Regional Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code President and Chief Executive Officer Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) City State Zip Code Mailing Address P O Box 1068 City State Zip Code FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ Coty State Zip Code FEC ID number of contributing federal political committee. Name of Employer Monroe Country Hospital Coccupation Chief Executive Officer Aggregate Year-to-Date ▼ Coccupation Chief Executive Officer Aggregate Year-to-Date ▼ From One Country Hospital FOO 00		-	t and Chief Executive Officer Year-to-Date ▼ 500.00	President	Receipt For: Primary General	Receip
City State Zip Code GA 30274-2600 FEC ID number of contributing federal political committee. Name of Employer Southern Regional Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. O.J. Booker Mailing Address P O Box 1068 City State Zip Code Transaction ID: 12892313 Forsyth GA 31029-1068 FEC ID number of contributing federal political committee. Name of Employer GA 31029-1068 City State Zip Code Transaction ID: 12892313 Forsyth GA 31029-1068 Name of Employer Monroe County Hospital Name of Employer Monroe County Hospital Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 1	Y Y Y Y 2 0 0 6	M M / D D / Y Y Y		e Road SW	Mr. Edward J Bonn	Mr. Edv
Riverdale FEC ID number of contributing federal political committee. Name of Employer Southern Regional Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. O.J. Booker Mailing Address P O Box 1068 City State Zip Code GA 31029-1068 FEC ID number of contributing federal political committee. Name of Employer Monroe County Hospital Name of Employer Monroe County Hospital Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date ▼ Cocupation Chief Executive Officer Aggregate Year-to-Date ▼ Amount of Each Receipt this Periods Page 1			Zin Code	State	City	City
FEC ID number of contributing federal political committee. Name of Employer Southern Regional Medical Center Receipt For:			•		•	•
Center Receipt For:	500.00			C		
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. O.J. Booker Mailing Address P O Box 1068 City State Zip Code Forsyth GA 31029-1068 FEC ID number of contributing federal political committee. Name of Employer Monroe County Hospital Receipt For: Primary General Date of Receipt M M M / D D / Y Y Y O N Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			t and Chief Executive Officer	President	Center	<u>Center</u>
Mr. O.J. Booker Mailing Address P O Box 1068 City State Zip Code Forsyth GA 31029-1068 FEC ID number of contributing federal political committee. Name of Employer Monroe County Hospital Receipt For: Primary General Date of Receipt M M O D D O O D O D O D O D O D O D O D				Aggregate	Primary General	P
City State Zip Code Forsyth GA 31029-1068 FEC ID number of contributing federal political committee. Name of Employer Monroe County Hospital Receipt For: Primary General O 8 2 3 2 0 Transaction ID: 12892313 Amount of Each Receipt this Period Cocupation Chief Executive Officer Aggregate Year-to-Date ▼		Date of Receipt		I	,	
City State Zip Code Forsyth GA 31029-1068 FEC ID number of contributing federal political committee. Name of Employer Monroe County Hospital Receipt For: Primary General State Zip Code GA 31029-1068 C 256 C 256	2006				Mailing Address P O Box 1068	Mailing
Forsyth GA 31029-1068 FEC ID number of contributing federal political committee. C Name of Employer Monroe County Hospital Receipt For: Primary General Amount of Each Receipt this Per 250 Chief Executive Officer Aggregate Year-to-Date			Zip Code	State	City	City
federal political committee. Name of Employer Monroe County Hospital Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date ▼		Amount of Each Receipt this Period	31029-1068	GA	Forsyth	Forsy
Receipt For: Primary General Aggregate Year-to-Date ▼	250.00	250.00		C		
Primary General 500.00			ecutive Officer	Chief Exe		
				Aggregate	Primary General	P
SUBTOTAL of Receipts This Page (optional)	250.00	1250.00)	nal)	SUBTOTAL of Receipts This Page (optional)	SUBTOT

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 104 (check only one) X
Any information copied from such Repo or for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	rts and Statements may not be sold or used by any personusing the name and address of any political committee to see PAC	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Don Campbell, , M.D. Mailing Address 3950 Austell Re	and	Date of Receipt
City	State Zip Code	0 8 2 3 2 0 0 6 Transaction ID: 12892330
Austell FEC ID number of contributing federal political committee.	GA 30106-1121	Amount of Each Receipt this Period 250.00
Name of Employer WellStar Cobb Hospital Receipt For: Primary General Other (specify)	Occupation Senior Vice President and Chief Medio Aggregate Year-to-Date ▼ 250.00	ca.
Full Name (Last, First, Middle Initial) Mr. Robert A. Colvin Mailing Address P O Box 23089		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12892347
Savannah FEC ID number of contributing federal political committee.	GA 31403-3089	Amount of Each Receipt this Period 250.00
Name of Employer Memorial Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Rita Culvern		Date of Receipt
Mailing Address 1067 Peachtree	e Street	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Louisville	State Zip Code GA 30434-1599	Transaction ID: 12892358 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.00
Name of Employer Jefferson Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 283.00	
SURTOTAL of Receipts This Page (or	otional)	533.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 104 (check only one) X
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initia Daniel Body Mailing Address 543 Flambeau	l)	Date of Receipt
City	State Zip Code	0 8 2 8 2 0 0 6 Transaction ID: 12897258
Mt Pleasant FEC ID number of contributing federal political committee.	SC 29464-2760	Amount of Each Receipt this Period 250.00
Name of Employer Palmetto Lowcountry Behav- ioral Health Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00]
Full Name (Last, First, Middle Initia Ms. Lisa Irvin Mailing Address 159 Harbour	,	Date of Receipt 0 8 2 8 2 0 0 6
City	State Zip Code	Transaction ID: 12897259
Mount Pleasant	SC 29464-2827	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation VP of Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initia Ms. Ellen Jackson Brown	1)	Date of Receipt
Mailing Address 316 Calhoun	Street	08 28 2006
City	State Zip Code	Transaction ID: 12897260
Charleston FEC ID number of contributing federal political committee.	SC 29401-1113	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation VP, Managed Care & Physician Servi	ic e s
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		750.00

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Bret Johnson Mailing Address 316 Calhoun Street City Charleston FEC ID number of contributing federal political committee. Name of Employer	State Zip Code SC 29401-1113 C	Date of Receipt M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Roper Hospital Receipt For: Primary General Other (specify)	Chief Financial Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Edmond R. Jordan Mailing Address 201 Graylyn Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Anderson FEC ID number of contributing federal political committee.	State Zip Code SC 29621-1985	Transaction ID: 12897262 Amount of Each Receipt this Period 500.00
Name of Employer AnMed Health Medical Center Receipt For: Primary General	Occupation Director of Urgent Care Aggregate Year-to-Date ▼ 500.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. J. Thornton Kirby Mailing Address 1000 Center Point F		Date of Receipt
City Columbia	State Zip Code SC 29210-5802	0 8 2 8 2 0 0 6 Transaction ID: 12897263 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.06
Name of Employer South Carolina Hospital Association Receipt For: Primary General	Occupation President & CEO Aggregate Year-to-Date ▼ 250.06	
Other (specify))	1000.06

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Steven Lopez, M.D. Mailing Address 911 Etiwan Park Street			Date of Receipt 0 8 2 8 2 0 0 6
	City Daniel Island	State SC	Zip Code 29492-7923	Transaction ID: 12897267 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.50
	Name of Employer Palmetto Lowcountry Behavioral Health Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Medical I Aggregate		
3.	Full Name (Last, First, Middle Initial) Dr. Joseph Modzelewski Mailing Address 2435 Forest Drive			Date of Receipt 0 8 2 8 2 0 0 6
	City	State	Zip Code	Transaction ID: 12897270
	Columbia FEC ID number of contributing federal political committee.	SC	29204-2026	Amount of Each Receipt this Period 500.00
	Name of Employer Sisters of Charity Providence Hospital Receipt For: Primary General Other (specify) ▼		ef of Medical Staff • Year-to-Date ▼ 500.00	1
_	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0 0	
•	Mr Jerry A Parrish Mailing Address 107 Nottingham Court			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12897272
	Anderson FEC ID number of contributing federal political committee.	SC C	29621	Amount of Each Receipt this Period 250.00
	Name of Employer AnMed Health Medical Cent- er	Occupation Vice Pres		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1150.50
T	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 104 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG		areas of any political committee to	Solot Contributions from Scott Committees.
Full Name (Last, First, Middle Initial) Mr. Greg Rusnak			Date of Receipt
Mailing Address 701 Grove Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Greenville	State SC	Zip Code 29605-4211	Transaction ID: 12897275 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Greenville Memorial Hospi- tal	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Matthew J Severance			Date of Receipt
Mailing Address 316 Calhoun Street	:		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charleston	State SC	Zip Code	Transaction ID: 12897278
FEC ID number of contributing federal political committee.	C	29401-1113	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr Steven D Shapiro, , M.D.			Date of Receipt
Mailing Address 316 Calhoun Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12897279
Charleston FEC ID number of contributing federal political committee.	SC C	29401-1113	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation Vice Pres	n sident for Medical Affairs	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	ıl)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Stuart Smith		Date of Receipt
Mailing Address 169 Ashley Avenue City	State Zip Code	0 8 2 8 2 0 0 6 Transaction ID: 12897280
Charleston	SC 29425-8905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer MUSC Medical Center of Medical Univers Receipt For: Primary General Other (specify) ▼	Occupation Vice President Clinical Operations and Aggregate Year-to-Date 500.00	1
Full Name (Last, First, Middle Initial) Mr. Allan Stalvey		Date of Receipt
Mailing Address 900 Gregg Street		08 28 2006
City	State Zip Code	Transaction ID: 12897283
<u>Columbia</u>	SC 29201-3913	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.06
Name of Employer South Carolina Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.06	
Full Name (Last, First, Middle Initial) Ms. Jeanne L Ward		Date of Receipt
Mailing Address 298 Memorial Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12897284
<u>Seneca</u>	SC 29672-9499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oconee Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	1000.06
TOTAL This Period (last page this line number	<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Douglas Bowling		Date of Receipt
	Mailing Address 2509 Watercrest Lane		08 / 28 / 2006
	City Johns Island	State Zip Code SC 29455-3108	Transaction ID: 12897286 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Roper Hospital	Occupation Vice President of System Developmer	nt
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Dr. Richard Boyer		Date of Receipt
	Mailing Address 6143 Hampton Ridge		08 28 2006
	City	State Zip Code	Transaction ID: 12897287
	Columbia	SC 29209-1308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Sisters of Charity Provid- ence Hospital	Occupation Director of Emergency Department	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	500.00	
	Full Name (Last, First, Middle Initial) Mr. Allen P Carroll		Date of Receipt
	Mailing Address 2095 Henry Tecklenbu	rg Drive	08 28 2006
	City	State Zip Code	Transaction ID: 12897289
	Charleston	SC 29414-5733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Roper Hospital	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
			1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Philip A Clayton Mailing Address PO Box 829 City Conway FEC ID number of contributing federal political committee. Name of Employer Conway Medical Center Receipt For: Primary General Other (specify)	State Zip Code SC 29528 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Richard E D'Alberto, , FACHE Mailing Address P O Box 976 City Clinton FEC ID number of contributing federal political committee. Name of Employer Laurens County Healthcare System Receipt For: Primary General Other (specify)	State Zip Code SC 29325-0976 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas C Dandridge Mailing Address 3000 St Matthews Roc City Orangeburg FEC ID number of contributing federal political committee. Name of Employer Regional Medical Center of Orangeburg Receipt For: Primary General Other (specify)	State Zip Code SC 29118-1442 C Occupation President Aggregate Year-to-Date 500.00	Date of Receipt M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	· • • • • • • • • • • • • • • • • • • •	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 104 (check only one) X
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any pename and address of any political committe	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. J. Larry Dozier, , Jr., FAC		Date of Receipt
Mailing Address 1325 Spring Street		08 28 2006
City	State Zip Code	Transaction ID: 12897296
Greenwood	SC 29646-3860	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fairfield Memorial Hospit- al	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	'.
Full Name (Last, First, Middle Initial) Mr. David L. Dunlap, FACHE		Date of Receipt
Mailing Address 125 Doughty Street Suite 760		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12897298
Charleston	SC 29403-5736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Roper Hospital	Occupation President and Chief Executive Offi	icer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) George T. Edwards		Date of Receipt
Mailing Address 787 Shell Island Circle		08 28 2006
City	State Zip Code	Transaction ID: 12897299
Charleston	SC 29412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation Director of Legal Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 104 (check only one) X 11a 11b 11c 12
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	С		
Full Name (Last, First, Middle Initial) Mr. Howard Harrison Mailing Address 316Calhoun Street			Date of Receipt
City	State	Zip Code	0 8 2 8 2 0 0 6 Transaction ID: 12897301
Charleston	SC	29401-1113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Roper Hospital	Occupation VP, Huma	an Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Heydel	I		Date of Receipt
Mailing Address 1325 Spring Street			08 / 28 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12897304
Greenwood	SC	29646-3860	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Self Regional Healthcare	Occupation President		
Receipt For:	Aggregate 1	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Mr. Steve Altmiller	•		Date of Receipt
Mailing Address 801 West Maple St	reet		08 01 2006
City	State	Zip Code	Transaction ID: 12897817
<u>Farmington</u>	NM	87401-5698	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer San Juan Regional Medical Center	 '	and Chief Executive Officer	<u>r</u>
Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional	al)		1500.00
TOTAL This Period (last page this line num	nber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jeff M. Dye Mailing Address 2121 Osuna Rd NE City Albuquerque FEC ID number of contributing federal political committee. Name of Employer New Mexico Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NM 87113-1001 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. William H Nelson Mailing Address 36 South State Street, City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Intermountain Healthcare, Inc. Receipt For: Primary General Other (specify)	22nd FI State Zip Code UT 84111-1624 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Charles W Sorenson, , Jr., M.D Mailing Address 36 South State Street, City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Intermountain Healthcare, Inc. Receipt For: Primary General Other (specify)	22nd FI State Zip Code UT 84111-1453 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 104 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Albert R Zimmerli Mailing Address 36 South State Street City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Intermountain Health Care,	State Zip Code UT 84111-1453 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Inc. Receipt For: Primary General Other (specify)	Senior Vice President and Chief Finar Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard Smith Mailing Address 1400 North 500 East		Date of Receipt M M
City	State Zip Code	Transaction ID: 12899589
Logan FEC ID number of contributing federal political committee.	UT 84341-2499	Amount of Each Receipt this Period 300.00
Name of Employer Logan Regional Hospital	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Mark H Shuter		Date of Receipt
Mailing Address 272 Hospital Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12902516
Chillicothe FEC ID number of contributing federal political committee.	OH 45601-9031	Amount of Each Receipt this Period 500.00
Name of Employer Adena Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	-	- 1

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 104 (check only one) X
or for comme	ion copied from such Reports and St ercial purposes, other than using the F COMMITTEE (In Full) an Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Gordo	e (Last, First, Middle Initial) on F. Brunner ddress 7300 Sanderson Place			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	oti.	State OH	Zip Code	Transaction ID: 12902518
	number of contributing bilitical committee.	С	45243-4045	Amount of Each Receipt this Period 250.00
Receipt F	Employer sprital For: mary General ner (specify)	Occupatio Trustee Aggregate	e Year-to-Date ▼ 250.00	1
Full Name Ms. Auror Mailing A		re		Date of Receipt
City		State	Zip Code	0 8 1 7 2 0 0 6 Transaction ID: 12902520
Cincinn	ati	OH	45240-1002	Amount of Each Receipt this Period
	number of contributing plitical committee.	С		250.00
Name of Jewish H	Employer lospital	Occupatio Senior V	n ice President	
	For: mary General ner (specify)		e Year-to-Date ▼ 250.00	
	e (Last, First, Middle Initial) R. Carpenter			Date of Receipt
Mailing A	ddress 6229 Northlake Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 12962845
	number of contributing	MO C	64152-6080	Amount of Each Receipt this Period 600.00
federal po	plitical committee.	C		000.00
Name of North Ka	Employer nsas City Hospital	Occupatio Presiden	n t and Chief Executive Office	r
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 104 (check only one) X 11a
A 0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. James V. Ferando		Date of Receipt
	Mailing Address P. O. Box 26666		08 14 2006
	City	State Zip Code	Transaction ID: 12962853
	Albuquerque	NM 87125-6666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Presbyterian Healthcare Services	Occupation Sr. Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	
. –	Full Name (Last, First, Middle Initial) Mr. Samuel T Wallace		Date of Receipt
	Mailing Address 1200 Pleasant Street		08 17 2006
	City	State Zip Code	Transaction ID: 12963422
	Des Moines	IA 50309-1453	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Iowa Health System	Occupation President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
_	Full Name (Last, First, Middle Initial) Mr. Robert R Sellers		Date of Receipt
	Mailing Address 631 North Eighth Stre	et	0 8 1 7 2 0 0 6
	City	State Zip Code	Transaction ID: 12963423
	Missouri Valley	IA 51555-1199	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Alegent Health Community Memorial Hosp	Occupation Regional Administrator	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	250.00	
Г			800.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Jeanne Goche Mailing Address 410 Main Street City	State Zip Code	Date of Receipt M M
Manning FEC ID number of contributing federal political committee.	IA 51455-1093	Amount of Each Receipt this Period 250.00
Name of Employer Manning Regional Healthca- re Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Executive Officer and Administra Aggregate Year-to-Date 250.00	<u>a</u>
Full Name (Last, First, Middle Initial) Mr. Eric L Lothe Mailing Address 4250 Glass Road I	NE, Suite 200	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12963428
Cedar Rapids	IA 52402-2500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Health Enterprises of Iowa	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Donna Katen-Bahensky Mailing Address 9522 Blue Heron D	Orive	Date of Receipt
City	State Zip Code	08 17 2006 Transaction ID: 12963432
Middleton	WI 53562-5068	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer University of Wisconsin Hospital and C Receipt For:	Occupation President and CEO	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (option	al)	1100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. Charles L Millburg, , CHE Mailing Address 300 Pershing Avenue City Shenandoah	State IA	Zip Code 51601-2355	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C	31001-2333	Amount of Each Receipt this Period 250.00
	Name of Employer Shenandoah Medical Center Receipt For: Primary General Other (specify) ▼		ecutive Officer Year-to-Date 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Peter W Thoreen Mailing Address 2720 Stone Park Boule	vard		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12963434
	Sioux City FEC ID number of contributing federal political committee.	C	51104-3795	Amount of Each Receipt this Period 500.00
	Name of Employer St. Luke's Regional Medic- al Center Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Office e Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Ronald R Reed			Date of Receipt
	Mailing Address 500 East Market Street			08 17 2006
	City Iowa City	State IA	Zip Code 52245-2689	Transaction ID: 12963435 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32243 2003	250.00
	Name of Employer Mercy Iowa City	Occupation Presiden	n t and Chief Executive Office	<u> </u>
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42/104 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		· · ·	
Full Name (Last, First, Middle Initial) Mr. Greg E. Boattenhamer			Date of Receipt
Mailing Address 100 East Grand Ave Suite 100	enue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Des Moines	State IA	Zip Code 50309-1829	Transaction ID: 12963437
FEC ID number of contributing federal political committee.	C	30309-1629	Amount of Each Receipt this Period 500.00
Name of Employer Iowa Hospital Association	Occupation Sr. Vice	n President, Government Rela	tio
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Kim A Russel			Date of Receipt
Mailing Address 1600 South 48th Str	reet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lincoln	State NE	Zip Code 68506-1275	Transaction ID: 12963438
FEC ID number of contributing federal political committee.	C	00000 1270	Amount of Each Receipt this Period 500.00
Name of Employer BryanLGH Medical Center	Occupation Presiden	n t and Chief Executive Office	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Leo A. Bressanelli			Date of Receipt
Mailing Address 1227 East Rusholm	e Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12963440
Davenport FEC ID number of contributing federal political committee.	C	52803-2498	Amount of Each Receipt this Period 500.00
Name of Employer Genesis Health System	Occupation Presiden	n t & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			1500.00

Zip Code 50049-9661 Zip Code 50049-9661 Zip Code 50677-2929	Date of Receipt Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
50049-9661 ✓ ear-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
50049-9661 ✓ ear-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
50049-9661 ✓ ear-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Year-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
250.00 Zip Code	Transaction ID: 12963443 Amount of Each Receipt this Period
250.00 Zip Code	Transaction ID: 12963443 Amount of Each Receipt this Period
•	Transaction ID: 12963443 Amount of Each Receipt this Period
•	Transaction ID: 12963443 Amount of Each Receipt this Period
•	Amount of Each Receipt this Period
50677-2929	
	250.00
	230.00
cutive Officer	
∕ear-to-Date ▼ 250.00	
	Date of Receipt
	08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Zip Code	Transaction ID: 12963444
52403-1251	Amount of Each Receipt this Period
	500.00
and Chief Executive Office	cer
Year-to-Date ▼ 500.00	
	1000.00
	and Chief Executive Office Year-to-Date ▼

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 104 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David M Holcomb Mailing Address P O Box 2C City Council Bluffs FEC ID number of contributing federal political committee. Name of Employer Jennie Edmundson Hospital Receipt For: Primary General Other (specify)	State Zip Code IA 51502-3002 C Occupation President and Chief Executive Office Aggregate Year-to-Date 250.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Art J. Spies Mailing Address 100 E. Grand Ave. Su City Des Moines FEC ID number of contributing federal political committee. Name of Employer lowa Hospital Association Receipt For:	State Zip Code IA 50309-1800 C Occupation Senior Vice President, Membership S Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 8 1 7 2 0 0 6 Transaction ID: 12963447 Amount of Each Receipt this Period 250.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Gary S. Kahn Mailing Address 1104 S. 5th Ave. W. City Newton	250.00 State Zip Code IA 50208-3511	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Skiff Medical Center	C Occupation Trustee	500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	he Cireck only one)
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may not be sold or used by a	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG	•	
Full Name (Last, First, Middle Initial) Mr. J. Kirk Norris		Date of Receipt
Mailing Address 5055 Upper Creek I	Drive	0 8 1 7 2 0 0 6
City Pleasant Hill	State Zip Code IA 50327	Transaction ID: 12963449
FEC ID number of contributing federal political committee.	C 50327	Amount of Each Receipt this Period 500.00
Name of Employer Iowa Hospital Association	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
Full Name (Last, First, Middle Initial) Ms. Mary Ann Osborn, RN, MA		Date of Receipt
Mailing Address 1026 A Avenue		0 8 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12963450
Cedar Rapids FEC ID number of contributing federal political committee.	IA 52402-5036	Amount of Each Receipt this Period 250.00
Name of Employer St. Luke's Hospital	Occupation Vice President, Chief Clinical (Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.	.00
Full Name (Last, First, Middle Initial) Ms. Sandra L. McIntosh, RN, MA, CN		Date of Receipt
Mailing Address 1208 Woodland Dr.	SE	08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12963451
Cedar Rapids FEC ID number of contributing federal political committee.	IA 52403-9076	Amount of Each Receipt this Period 250.00
Name of Employer St. Luke's Hospital	Occupation Director, Emergency Medical/S	Surgical
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼	1 1 1
SUBTOTAL of Receipts This Page (optional	l)	1000.00
TOTAL This Period (last page this line num	ber only)	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \ \	ny information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley Mailing Address 257 Clouse Lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Granville	State Zip Code OH 43023-1428	Transaction ID: 12964419
	FEC ID number of contributing federal political committee.	OH 43023-1428	Amount of Each Receipt this Period 125.00
	Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date ▼ 375.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. Brent A Marsteller Mailing Address 2010 Military Road		Date of Receipt
	City	State Zip Code	0 8 3 1 2 0 0 6 Transaction ID: 12971541
	Huntington	WV 25701-5339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Cabell Huntington Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
 }.	Full Name (Last, First, Middle Initial) Mr. Mark Doak		Date of Receipt
	Mailing Address Rt. 1 Box 180		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 12971543
	Beverly FEC ID number of contributing federal political committee.	WV 26253-9753	Amount of Each Receipt this Period 250.00
	Name of Employer Davis Memorial Hospital	Occupation President and Chief Executive Officer	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		875.00

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City Morgantown FEC ID number of contributing federal political committee.	name and address of any political committee to s	Date of Receipt Date of Receipt
Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City Morgantown FEC ID number of contributing	State Zip Code WV 26508-8064	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Morgantown FEC ID number of contributing	WV 26508-8064	Amount of Each Receipt this Period
Name of Employer Monongalia General Hospit- al Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date 500.00	-
Full Name (Last, First, Middle Initial) Ms. Karen L Bowling Mailing Address 127 Orlando Street		Date of Receipt 0 8 3 1 2 0 0 6
City	State Zip Code WV 25801-8792	Transaction ID: 12971546
Beckley FEC ID number of contributing federal political committee.	WV 25801-8792	Amount of Each Receipt this Period 500.00
Name of Employer Raleigh General Hospital	Occupation Chief Executive Officer]
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Scott C Stamm		Date of Receipt
Mailing Address P O Box 1875		0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Huntington	State Zip Code WV 25719-1875	Transaction ID: 12971547 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 25/10/10/0	265.00
Name of Employer River Park Hospital	Occupation Chief Executive Officer	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 265.00	
SUBTOTAL of Receipts This Page (optional)	······	1265.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48/104 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Tony E Atkins			Date of Receipt
Mailing Address 1 Amalia Drive			0 8 3 1 2 0 0 6
City	State	Zip Code	Transaction ID: 12971548
Buckhannon FEC ID number of contributing federal political committee.	C	26201-2276	Amount of Each Receipt this Period 500.00
Name of Employer St. Joseph's Hospital of Buckhannon Receipt For: Primary General Other (specify) ▼		ecutive Officer e Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard L. Miller Mailing Address #4 Stony Point Road	d		Date of Receipt 0 8 3 1 2 0 0 6
City	State	Zip Code	Transaction ID: 12971552
Charleston FEC ID number of contributing federal political committee.	C	25314-1670	Amount of Each Receipt this Period 500.00
Name of Employer West Virginia Hospital As- sociation	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael B. Robbins	1		Date of Receipt
Mailing Address 31 Carriage Road			08 31 2006
City Charleston	State WV	Zip Code 25314-2165	Transaction ID: 12971553
FEC ID number of contributing federal political committee.	C	23314-2103	Amount of Each Receipt this Period 250.00
Name of Employer West Virginia Hospital As- sociation		nancial Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. George G Couch Mailing Address 36 Floral Drive City Wheeling FEC ID number of contributing federal political committee. Name of Employer Wetzel County Hospital Receipt For: Primary General Other (specify)	State Zip Code WV 26003-5464 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Mr. Mark J Howard Mailing Address 3100 North Tenaya Wa City Las Vegas FEC ID number of contributing federal political committee. Name of Employer MountainView Hospital Receipt For: Primary General Other (specify)	State Zip Code NV 89128-0436 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ C.	Full Name (Last, First, Middle Initial) Dr. Benjamin K. Chu, M.D. Mailing Address 393 E. Walnut Street 7th Floor City Pasadena FEC ID number of contributing federal political committee. Name of Employer Kaiser Foundation Health Plan and Hosp Receipt For: Primary General Other (specify)	State Zip Code CA 91188-0001 C Occupation Regional President, Southern Californ Aggregate Year-to-Date 750.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
F	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)	· · · · · · · · · · · · · · · · · · ·	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Helen R. Strieder Mailing Address 83 Penniman Place City	State Zip Code	Date of Receipt M M
Brookline FEC ID number of contributing federal political committee.	MA 02445-4135	Amount of Each Receipt this Period 250.00
Name of Employer New England Baptist Hospital Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 500.00	-
Full Name (Last, First, Middle Initial) Mr. Eric J. Beyer Mailing Address 641 Salem End Ro	ad	Date of Receipt 0 8 3 1 2 0 0 6
City	State Zip Code	Transaction ID: 12976084
<u>Framingham</u>	MA 01702-5529	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Tufts Medical Center	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Dana P Diggins		Date of Receipt
Mailing Address 133 Old Rd to Nine	Acre Corner	0 8 3 1 2 0 0 6
City <u>Concord</u>	State Zip Code MA 01742-9120	Transaction ID: 12976085
FEC ID number of contributing federal political committee.	MA 01742-9120	Amount of Each Receipt this Period 250.00
Name of Employer Emerson Hospital	Occupation Senior Vice President and Chief Finance	g
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	al)	750.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 104 (check only one) X 11a
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to n PAC	ion for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial Gary Lapidas Mailing Address 33 Christine S City Worcester FEC ID number of contributing federal political committee.	·	Date of Receipt M M M
Name of Employer UMass Memorial Health Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initia Mr. Calvin M. Pierson Mailing Address 4 Kampman (,	Date of Receipt 0 8 3 1 2 0 0 6
City Sparks FEC ID number of contributing federal political committee.	State Zip Code MD 21152-9423	Transaction ID: 12976087 Amount of Each Receipt this Period 800.00
Name of Employer Maryland Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initia Ms. Pamela Williams Mailing Address 7535 Gilley T	,	Date of Receipt 0 8 3 1 2 0 0 6
City Baltimore	State Zip Code MD 21237-3703	Transaction ID: 12976091 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Harbor Hospital	Occupation	250.00
Receipt For: Primary General Other (specify)	Asst. VP, Human Resources Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1300.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate s for each catego Detailed Summ	ry of the
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may not be sold or use	d by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	•	
Full Name (Last, First, Middle Initial) Mr. Thomas Gipson		Date of Receipt
Mailing Address 3001 South Hano	ver Street	08 31 2006
City Baltimore	State Zip Code MD 21225-1233	Transaction ID: 12976092 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Harbor Hospital	Occupation Vice President, Medical A	Affairs
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
Full Name (Last, First, Middle Initial) Mr. Thomas Corley	I	Date of Receipt
Mailing Address North 5633 Lidger		08 31 7 2006
City Spokane	State Zip Code WA 99208-1224	Transaction ID: 12976116 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Holy Family Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	375.00
Full Name (Last, First, Middle Initial) Mr. John T Evans, , Jr.	I	Date of Receipt
Mailing Address P O Box 1887		08 31 2006
City Wenatchee	State Zip Code WA 98807-1887	Transaction ID: 12976117
FEC ID number of contributing federal political committee.	C 98807-1887	Amount of Each Receipt this Period 250.00
Name of Employer Central Washington Hospit- al	Occupation President and Chief Execution	cutive Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
SUBTOTAL of Receipts This Page (option	nal)	750.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 104 (check only one) X
or for con	nation copied from such Reports and St Imercial purposes, other than using the OF COMMITTEE (In Full) Ican Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Ge	ame (Last, First, Middle Initial) rard Fischer g Address 5909 West Pima Court	State WA	Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y
FEC I federa	O number of contributing I political committee. of Employer d Heart Medical Cent-	C		Amount of Each Receipt this Period 250.00
<u>er</u> Receij			sident- Systems Developme Year-to-Date ▼ 250.00	nt
Mr. Rie	ame (Last, First, Middle Initial) chard W Linneweh, , Jr. g Address 2811 Tieton Drive			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Yakir	na	State WA	Zip Code 98902-3799	Transaction ID: 12976119 Amount of Each Receipt this Period
	O number of contributing I political committee.	C		250.00
spital Recei	of Employer a Valley Memorial Ho- ot For: Primary General Other (specify)		n t and Chief Executive Office Year-to-Date ▼ 250.00	<u>r</u>
Ms. St	ame (Last, First, Middle Initial) san Reiter			Date of Receipt
	g Address PO Box 307			08 / 31 / 2006
City <u>Enun</u>	nclaw	State WA	Zip Code 98022-0307	Transaction ID: 12976120 Amount of Each Receipt this Period
	O number of contributing political committee.	C		250.00
Name Franc	of Employer scan Health System	Occupation Trustee	n	
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTO	TAL of Receipts This Page (optional)			750.00

City Monroe WA S8272-0646 FEC ID number of contributing tederal political committies. Variety General Hospital Receipt For: Primary General Other (specify) ▼ FUI Name (Last, First, Middle Initial) Milling Address 14432 SE Eastgate Way, Ste 300 City Bellevue WA S8007-6493 FEC ID number of contributing tederal political committee. C Variety State Variety State		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 104 (check only one) X 11a
A. Mr. Mark D Judy Mailling Address P O Box 646 City State Zip Code Monroe WA 98272-0646 FEC ID number of contributing lederal political committee. Receipt For: Primary General Other (specify) ▼ State Zip Code Other (specify) ▼ Date of Receipt Transaction ID: 12976121 Amount of Each Receipt this Period Transaction ID: 12976121 Amount of Each Receipt this Period Transaction ID: 12976122 Amount of Each Receipt this Period Date of Receipt Transaction ID: 12976125 Transact		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	itatements ma name and ad	ay not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Name of Employer Valley General Hospital Chief Executive Officer Receipt For: Primary General Other (specify) ▼ State Zip Code Mailing Address 14432 SE Eastgate Way, Ste 300	∠ A.	Mr. Mark D Judy Mailing Address P O Box 646 City Monroe FEC ID number of contributing	WA	·	0 8 3 1 2 0 0 6 Transaction ID: 12976121
Mailing Address 14432 SE Eastgate Way, Ste 300 City State Zip Code WA 98007-6493 FEC ID number of contributing federal political committee. Name of Employer Peace Receipt Primary General City State Zip Code Aggregate Year-to-Date ▼ City State Zip Code Transaction ID: 12976122 Amount of Each Receipt this Period Feceipt President and Chief Executive Officer Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Thomas Plasmusson Mailing Address 525 North Foster City State Zip Code SD 57301-2966 FEC ID number of contributing federal political committee. City State Zip Code SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation Regional President Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Occupation Regional President Aggregate Year-to-Date ▼ 250.00		Name of Employer Valley General Hospital Receipt For: Primary General	Occupation Chief Ex	ecutive Officer e Year-to-Date ▼	
City State Zip Code WA 98007-6493 FEC ID number of contributing federal political committee. Name of Employer PeaceHealth Full Name (Last, First, Middle Initial) Mr. Thomas P Rasmusson Mailing Address 525 North Foster City State Zip Code MA 98007-6493 FeC ID number of contributing federal political committee. City State Zip Code Mitchell SD 57301-2966 FEC ID number of contributing federal political committee. City State Zip Code Mitchell SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt For: Primary General Other (specify) ▼ 250.00 Aggregate Year-to-Date ▼ 250.00	- 3.	Mr. Alan R Yordy	ay, Ste 300		M ' M / D ' D / Y ' Y ' Y ' Y
FEC ID number of contributing federal political committee. Name of Employer PeaceHealth Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Thomas P Rasmusson Mailing Address 525 North Foster City State Zip Code SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt For: Primary Cannot federal political committee. C Cuty State Zip Code SD 57301-2966 C Cuty State Zip Code SD 57301-2966 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ C Cuty State Zip Code SD 57301-2966 Transaction ID: 12976221 Amount of Each Receipt this Period Scannot State Scannot Scannot State Scannot Scannot Scannot Scannot Scannot Scannot Scannot Scannot Scannot Sc		City	State	Zip Code	
Name of Employer PeaceHealth President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Thomas P Rasmusson Mailing Address 525 North Foster City State Zip Code Mitchell SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M / D D D / Y Y Y O Y O O O O O O O O O O O O O O		<u>Bellevue</u>	WA	98007-6493	Amount of Each Receipt this Period
Receipt For:		federal political committee.	С		500.00
Receipt For:		Name of Employer PeaceHealth			ar .
Mailing Address 525 North Foster City State Zip Code Mitchell SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D 3 1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Primary General		e Year-to-Date ▼	
City Mitchell SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt For: Primary Other (specify) ▼ C State Zip Code SD 57301-2966 Transaction ID: 12976221 Amount of Each Receipt this Period 250.00 C Aggregate Year-to-Date ▼ 250.00	-).				Date of Receipt
City State Zip Code SD 57301-2966 FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Receipt For: Primary General Other (specify) ▼ State Zip Code SD 57301-2966 C		Mailing Address 525 North Foster			
FEC ID number of contributing federal political committee. Name of Employer Avera Queen of Peace Regional President Receipt For: Primary General Other (specify) Other (specify) Aggregate Year-to-Date 250.00		City	State	Zip Code	
Name of Employer Avera Queen of Peace Receipt For: Primary Other (specify) ▼ Occupation Regional President Aggregate Year-to-Date 250.00		Mitchell	SD	57301-2966	Amount of Each Receipt this Period
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			C		250.00
Primary General Other (specify) ▼ 250.00		Name of Employer Avera Queen of Peace			
1250.00		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 104 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Fredrick Slunecka Mailing Address P O Box 5045 City	State	Zip Code	Date of Receipt M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Sioux Falls FEC ID number of contributing federal political committee.	SD	57117-5045	Amount of Each Receipt this Period 250.00
Name of Employer Avera McKennan Hospital and University Receipt For: Primary General Other (specify) ▼		President President President 9 Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Dr David Erickson Mailing Address P O Box 38	•		Date of Receipt 0 8 3 1 2 0 0 6
City Yankton	State SD	Zip Code	Transaction ID: 12976224
FEC ID number of contributing federal political committee.	C	57078-0038	Amount of Each Receipt this Period 125.00
Name of Employer Avera Health		ice President and Chief Med	ica
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Deb Fischer-Clemens			Date of Receipt
Mailing Address 3900 West Avera D	Prive		08 31 YYYY 2006
City Sioux Falls	State SD	Zip Code 57108-5729	Transaction ID: 12976225
FEC ID number of contributing federal political committee.	C	3/100-3/29	Amount of Each Receipt this Period 250.00
Name of Employer Avera Health	Occupation Director	n Center for Public Policy	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		625.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms Cindy Morrison		Date of Receipt
Mailing Address 2009 East Edgewood		08 31 2006
City <u>Sioux Falls</u>	State Zip Code SD 57103-4607	Transaction ID: 12976229 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sanford Health	Occupation Senior Vice President for Public Polic	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Becky Nelson Mailing Address P O Box 5039		Date of Receipt
1305 West 18th Stre		08 31 2006
City Sioux Falls	State Zip Code SD 57117-5039	Transaction ID: 12976230 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sanford University of Sou- th Dakota Med	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William Mason Moss		Date of Receipt
Mailing Address 2300 Opitz Boulevar	d	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Woodbridge	State Zip Code VA 22191-3311	Transaction ID: 12977896
FEC ID number of contributing federal political committee.	C 22191-3311	Amount of Each Receipt this Period 250.00
Name of Employer Potomac Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (ontional)	>	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A C	r for commercial purposes, other than using the	statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Anthony R. Clark		Date of Receipt
	Mailing Address 13003 Occoquan Roa		08 / 31 / 2006
	City Woodbridge	State Zip Code VA 22192-2810	Transaction ID: 12977899
	FEC ID number of contributing federal political committee.	C 22192-2810	Amount of Each Receipt this Period 250.00
	Name of Employer Prince William Hospital	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Judie S. Snipes Meiling Address 77 Clausester Court		Date of Receipt
	Mailing Address 77 Gloucester Court		08 31 2006
	City	State Zip Code	Transaction ID: 12977901
	Troutville FEC ID number of contributing federal political committee.	VA 24175-6625	Amount of Each Receipt this Period 250.00
	Name of Employer Carillon Clinic	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Mr. John F. Duval		Date of Receipt
	Mailing Address 3307 Brewton Way		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Midlothian	State Zip Code VA 23113-3793	Transaction ID: 12977904
	FEC ID number of contributing federal political committee.	C 25115-5795	Amount of Each Receipt this Period 250.00
	Name of Employer VCU Health System	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any persor name and address of any political committee to s	for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Matthew J Perry Mailing Address 2951 Maple Avenue		Date of Receipt
City	State Zip Code	0 8 3 1 2 0 0 6 Transaction ID: 12977909
Zanesville	OH 43701-1406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Genesis HealthCare System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Donald E. Lorton		Date of Receipt
Mailing Address 1141 Windy Hill Road		08 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City	State Zip Code	Transaction ID: 12977913
Goodview	VA 24095-2909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carilion Clinic	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. J Knox Singleton		Date of Receipt
Mailing Address 8110 Gatehouse Road		08 31 7 2006
City	State Zip Code	Transaction ID: 12977914
Falls Church	VA 22042-1210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Inova Health System	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number of	·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 104 (check only one) X 11a
\ \ \	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Russell Seneca Mailing Address 3300 Gallows Road		Date of Receipt 0 8 3 1 2 0 0 6
	City Falls Church	State Zip Code VA 22042-3307	Transaction ID: 12977925 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Inova Fairfax Hospital Receipt For: Primary General Other (specify)	Occupation Chairman, Dept. Surgery Aggregate Year-to-Date 250.00	
	Full Name (Last, First, Middle Initial) Ms. Peggy J. Braun Mailing Address 3116 Yeates Lane		Date of Receipt 0 8 3 1 2 0 0 6
	City	State Zip Code	Transaction ID: 12977938
	Virginia Beach	VA 23452-6117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	62.50
	Name of Employer Sentara Virginia Beach Ge- neral Hospita	Occupation Vice President, Nurse Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 202.50	
_	Full Name (Last, First, Middle Initial) Mr. Shawn McLaughlin		Date of Receipt
	Mailing Address 104 Commonwealth A	venue	08 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 12977948
	Alexandria FEC ID number of contributing federal political committee.	VA 22301-2316	Amount of Each Receipt this Period 250.00
	Name of Employer Inova Health System	Occupation Trustee	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		562.50

Any information copied from such Reports and		X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David L Bernd Mailing Address 6015 Poplar Hall Driv City	e State Zip Code	Date of Receipt M
Norfolk FEC ID number of contributing federal political committee.	VA 23502-3819	Amount of Each Receipt this Period 250.00
Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Bertram Reese Mailing Address 1513 Quail Point Roa	d	Date of Receipt 0 8 3 1 2 0 0 6
City	State Zip Code	Transaction ID: 12977952
Virginia Beach FEC ID number of contributing federal political committee.	VA 23454-3115	Amount of Each Receipt this Period 250.00
Name of Employer Sentara Healthcare	Occupation VP & Chief Information Officer	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John M. Toups		Date of Receipt
Mailing Address 1460 Waggaman Circ	cle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McLean	State Zip Code VA 22101-4004	Transaction ID: 12977955 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Inova Health System	Occupation Trustee	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	······	750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Gary R Yates Mailing Address 1065 Downshire Chase City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Virginia Beach FEC ID number of contributing federal political committee.	C	23452-6155	Amount of Each Receipt this Period 250.00
	Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼		dical Officer Year-to-Date ▼ 250.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. Vincent S Conti Mailing Address 22 Bramhall Street			Date of Receipt 0 8 3 1 2 0 0 6
	City Portland	State ME	Zip Code 04102-3134	Transaction ID: 12978588 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Maine Medical Center		t and CEO	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00]
- :	Full Name (Last, First, Middle Initial) Mr. James Morris			Date of Receipt
	Mailing Address 301 Second Street Nor		7:01	08 31 2006
	City <u>New Prague</u>	State MN	Zip Code 56071-1709	Transaction ID: 12978861 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		225.00
	Name of Employer Queen of Peace Hospital	Occupation Trustee	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			975.00
	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 104 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Debra K Boardman Mailing Address 323 South Minnesota City Crookston FEC ID number of contributing federal political committee. Name of Employer Riverview Healthcare Association	Street State Zip Code MN 56716-1600 C Occupation President and Chief Executive Officer	Date of Receipt M M
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard R Pettingill Mailing Address P O Box 43		Date of Receipt M M
City	State Zip Code	Transaction ID: 12978869
Minneapolis FEC ID number of contributing federal political committee.	MN 55440-0043 C Occupation	Amount of Each Receipt this Period 500.00
Name of Employer Allina Hospitals & Clinics Receipt For: Primary General Other (specify) ▼	President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ms. Margaret E Perryman	. [Date of Receipt
Mailing Address 200 East University A		08 31 2006
City <u>S</u> aint Paul	State Zip Code MN 55101-2598	Transaction ID: 12978873 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33101-2398	225.00
Name of Employer Gillette Children's Speci- alty Healthca Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 475.00]
		850.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben		Date of Receipt
Mailing Address 2550 University Ave		08 31 2006
City <u>Sa</u> int Paul	State Zip Code MN 55114-1052	Transaction ID: 12978885 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33114 1032	231.00
Name of Employer Minnesota Hospital Associ- ation	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 731.50	
Full Name (Last, First, Middle Initial) Mr. Mark Sonneborn Mailing Address 2550 University Ave	nue W	Date of Receipt
	nue vv.	08 31 2006
City	State Zip Code	Transaction ID: 12978888
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice President of Information Services	3
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) Mr. Craig J Broman		Date of Receipt
Mailing Address 1406 Sixth Avenue N	North	08 31 7 2006
City	State Zip Code	Transaction ID: 12978893
Saint Cloud FEC ID number of contributing federal political committee.	MN 56303-1901	Amount of Each Receipt this Period 250.00
Name of Employer St. Cloud Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	601.00
TOTAL This Period (last page this line numb	<u> </u>	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 104 (check only one) X 11a
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James F Hanko		Date of Receipt
Mailing Address 1300 Anne St. NW		0 8 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12978901
Bemidji	MN 56601-5103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.46
Name of Employer North Country Regional Ho- spital	Occupation President and Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	734.86	
Full Name (Last, First, Middle Initial) Dr. Peter E Person, , M.D.	1	Date of Receipt
Mailing Address 502 East Second Stre	et	08 31 2006
City	State Zip Code	Transaction ID: 12978904
<u>Duluth</u>	MN 55805-1982	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Mary's/Duluth Clinic Health System	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	7
Full Name (Last, First, Middle Initial)		
Mr. Keith D Harvey		Date of Receipt
Mailing Address 901 Ninth Street North	1	08 / 01 / 2006
City	State Zip Code	Transaction ID: 12978905
Virginia	MN 55792-2325	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Virginia Regional Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (optional)		670.46

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 104 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John Sackett		Date of Receipt
Mailing Address 100 Health Park Drive		08 / 01 / 2006
City	State Zip Code	Transaction ID: 12978970
Louisville	CO 80027-9583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Avista Adventist Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David P Gehant		Date of Receipt
Mailing Address P O Box 9019		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 12978972
Boulder	CO 80301-9019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Boulder Community Hospital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Rulon F Stacey		Date of Receipt
Mailing Address 1809 East Harmony R	oad	0 8 3 1 Y Y Y Y Y
City	State Zip Code	Transaction ID: 12978979
Fort Collins	CO 80528-3446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Poudre Valley Health Syst- em	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 104 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Mitchell C Carson Mailing Address P O Box 1659 City	State	Zip Code	Date of Receipt 0 8 3 1 2 0 0 6 Transaction ID: 12978995
Longmont FEC ID number of contributing federal political committee.	CO	80502-1659	Amount of Each Receipt this Period 250.00
Name of Employer Longmont United Hospital Receipt For: Primary General Other (specify) ▼	'	n t and Chief Executive Officer e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard Eitel Mailing Address 1400 E. Boulder St.	-		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Colorado Springs FEC ID number of contributing	State CO	Zip Code 80909	Transaction ID: 12978996 Amount of Each Receipt this Period 250.00
Name of Employer Memorial Health System Receipt For: Primary General Other (specify)	Occupation Chief Exe	n ecutive Officer e Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert W Ladenburger Mailing Address P O Box 1628			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Grand Junction FEC ID number of contributing federal political committee.	State CO	Zip Code 81502-1628	Transaction ID: 12979001 Amount of Each Receipt this Period 250.00
Name of Employer St. Mary's Hospital and Medical Center Receipt For: Primary General Other (specify) ▼		t and Chief Executive Officer Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	······	750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
_	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road City Upper Arlington	State OH	Zip Code 43220-4247	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer Ohio Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		on /ice President e Year-to-Date ▼ 225.00	
- В.	Full Name (Last, First, Middle Initial) Ms. Cathleen K Nelson Mailing Address 2200 Jefferson			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12979174
	Toledo FEC ID number of contributing federal political committee.	OH C	43604	Amount of Each Receipt this Period 6.25
	Name of Employer St. Charles Mercy Hospital	Occupation	on nt and Chief Executive Office	
	Receipt For: Primary General Other (specify) ▼	1	e Year-to-Date ▼ 256.25	
- C.	Full Name (Last, First, Middle Initial) Mr. Ronald L Jacobson Mailing Address 305 South State Street			Date of Receipt
			7:- Oada	08 31 2006
	City Aberdeen	State SD	Zip Code 57402-4450	Transaction ID: 12979418 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Avera St. Luke's	Occupation Regiona	on I President	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			381.25
T	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 104 (check only one) X 11a 11b 11c 12 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kelby K Krabbenhoft		Date of Receipt
Mailing Address P O Box 5039		08 31 YYYY 2006
City	State Zip Code	Transaction ID: 12979419
Sioux Falls	SD 57117-5039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sanford Health	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. David Kretschmer		Date of Receipt
Mailing Address HC 83, Box 88		08 31 2006
City	State Zip Code	Transaction ID: 12979421
<u>Custer</u>	SD 57730-9707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Custer Regional Hospital	Occupation Administrator	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David Link	<u> </u>	Date of Receipt
Mailing Address 2218 East St. Charles	Circle	08 31 2006
City	State Zip Code	Transaction ID: 12979423
Sioux Falls	SD 57103-5818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sanford Health	Occupation Executive Vice President	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·····	750.00

TOTAL This Period (last page this line number only)

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: PAGE 69 / 104 (check only one) X 11a 11b 11c 12 15 16
ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or e name and address of any po	r used by any person plitical committee to so	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Mary C. Mayhew Mailing Address 150 Capitol Street			Date of Receipt
	Ctata 7in Cada		08 31 2006
City Augusta	State Zip Code ME 04330-68		Transaction ID: 12979465 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0 0	500.00
Name of Employer Maine Hospital Association	Occupation Vice President, Gove	rnment Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date		
Full Name (Last, First, Middle Initial) Ms. Helen R. Strieder			Date of Receipt
Mailing Address 83 Penniman Place			08 22 2006
City	State Zip Code		Transaction ID: 12979489
Brookline	MA 02445-41	135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer New England Baptist Hospi- tal	Occupation Trustee		
Receipt For:	Aggregate Year-to-Date	▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia Kreutz			Date of Receipt
Mailing Address 900 Potomac Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 12979494
Aurora	CO 80011-67	716	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Spalding Rehabilitation Hospital	Occupation President and Chief E		
Receipt For: Primary General	Aggregate Year-to-Date	▼	
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)	1		1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Robert P Barbier	10	Date of Receipt
Mailing Address 530 South Jackso	n Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Louisville	State Zip Code KY 40202-3611	Transaction ID: 12979513 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer University of Louisville Hospital Receipt For:	Occupation Chief Financial Officer Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Mr. Terry Peeples Mailing Address P O Box 2400	•	Date of Receipt
City	State Zip Code	0 8 2 2 2 0 0 6 Transaction ID: 12979514
Hopkinsville	KY 42241-2400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Jennie Stuart Medical Cen- ter	Occupation Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. E. Berton Whitaker		Date of Receipt
Mailing Address 900 Clinic Drive		08 22 2006
City	State Zip Code	Transaction ID: 12979515
Madisonville FEC ID number of contributing federal political committee.	KY 42431-1653	Amount of Each Receipt this Period 1000.00
Name of Employer Regional Medical Center of Hopkins Cou Receipt For:	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	1	2600.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 104 (check only one) X
A oi	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Mr. Mark J Neff, , CHE			Date of Receipt
	Mailing Address 222 Medical Circle		7: 0 1	08 22 2006
	City Morehead	State KY	Zip Code 40351	Transaction ID: 12979517 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	1000.00
	Name of Employer St. Claire Regional Medic- al Center	Occupation Presiden	n t and Chief Executive Office	er_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Mr. Russ Ranallo			Date of Receipt
	Mailing Address 811 East Parrish Avenue			08 22 2006
	City	State	Zip Code	Transaction ID: 12979518
	Owensboro FEC ID number of contributing federal political committee.	C	42303-3268	Amount of Each Receipt this Period 600.00
	Name of Employer Owensboro Medical Health System	Occupation Vice Pres	n sident, Financial Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
_	Full Name (Last, First, Middle Initial) Mr. John Countzler	1		Date of Receipt
	Mailing Address 259 Ridgecrest Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12979519
	Owensboro FEC ID number of contributing federal political committee.	C	42301-8461	Amount of Each Receipt this Period 1000.00
	Name of Employer Owensboro Medical Health System		ce President-Finance	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			2600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 104 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Tony E. Welch Mailing Address 112 Deerfield Hills F City Elizabethtown FEC ID number of contributing	State Zip Code KY 42701-6974	Date of Receipt M M / D D / Y Y Y Y Y 0 8 2 2 2 2 0 0 6 Transaction ID: 12979521 Amount of Each Receipt this Period
Receipt For: Primary Other (specify)	C Occupation Vice President, Human Resources Aggregate Year-to-Date ▼ 300.00	300.00
Full Name (Last, First, Middle Initial) Ms. Kathryn Cook Mailing Address 85 North Grand Ave	enue State Zip Code	Date of Receipt M M
Fort Thomas FEC ID number of contributing federal political committee. Name of Employer St. Luke Hospital West	KY 41075-1793 C Occupation	Amount of Each Receipt this Period 300.00
St. Luke Hospital West Receipt For: Primary General Other (specify) ▼	Director Administrative and Corporate Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. David J. Lang Mailing Address 1008 Crewn Point		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Madisonville</u>	State Zip Code KY 42431-8692	Transaction ID: 12979539 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Regional Medical Center of Hopkins Cou Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President Human Resources Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional) >	900.00

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Garren Colvin Mailing Address 1 Medical Village Driv	/e	Date of Receipt 08 22 2006
City	State Zip Code	Transaction ID: 12979540
Covington FEC ID number of contributing federal political committee.	KY 41017-3403	Amount of Each Receipt this Period 300.00
Name of Employer St. Elizabeth Medical Center-South Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Senior Vice President and Chief Finance Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Karen Profitt Newman Mailing Address 4000 Kresge Way		Date of Receipt 0 8 2 2 2 0 0 6
City	State Zip Code	Transaction ID: 12979541
Louisville	KY 40207-4676	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Baptist Hospital East	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr Mark B Carter		Date of Receipt
Mailing Address 200 Abraham Flexne	Way	08 28 2006
City	State Zip Code	Transaction ID: 17389195
Louisville FEC ID number of contributing federal political committee.	KY 40202-1818	Amount of Each Receipt this Period 0.00
Name of Employer Jewish Hospital	Occupation Senior Vice President Strategic Planni	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$600.00 This changes the YTD Total to \$0
SUBTOTAL of Receipts This Page (optional)		600.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 104 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not e name and addres	t be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		, р	
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Katie Vaughan			Date of Receipt
Mailing Address 506A East Howell Ave	enue		08 / 31 / 2006
City	State	Zip Code	Transaction ID: PR1034595117417
Alexandria	VA	22301-1216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa-	Occupation Associate Di	rector	
tion-Washingt Receipt For:	Aggregate Yea		\dashv
Primary General	Aggregate rea		P/R Deduction (\$20.00 Bi-
Other (specify) ▼		340.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton			Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	IW		M M / D D / Y Y Y Y Y Y A A A A A A A A A A A A A
City	State	Zip Code	Transaction ID: PR1045726217417
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer American Hospital Associa-	Occupation		
tion-Washingt	Senior Vice	President & General Cou	ınse
Receipt For:	Aggregate Yea	ar-to-Date ▼	
Primary General Other (specify) ▼	0 0 0	680.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sohini Jindal	I		Date of Receipt
Mailing Address 325 Seventh Street, N	IW		0 8 3 1 2 0 0 6
City	State	Zip Code	Transaction ID: PR1125613617417
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Asso	ciate Director	
Receipt For:	Aggregate Yea		
Primary General	35 5		P/R Deduction (\$20.00)
Other (specify) ▼		340.00	·
SUBTOTAL of Receipts This Page (optional).			160.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 104 (check only one) X 11a
A or	for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Lindsay Mac Robinson		Date of Receipt
	Mailing Address 107 East Lane	Chata 7in Cada	0 8 3 1 2 0 0 6 2 2 0 0 6
	City Lake Barrington	State Zip Code IL 60010-1939	Transaction ID: PR327727317417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMGs	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	680.00	P/R Deduction (\$39.00)
	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
	Mailing Address 11004 Petersborough	Drive	08 31 2006
	City	State Zip Code	Transaction ID: PR327745917417
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	680.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
	Mailing Address 1003 Kimberly Place		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327801717417
	Great Falls	VA 22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi- Weekly)
			200.00

ITEMIZED REC		monte may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / (check only one) X 11a 11b 11c 12 13 14 15 16	2 5 1 1
or for commercial purp	oses, other than using the nam	ne and addr	rot be sold of used by any per- less of any political committee	son for the purpose of soliciting contribution to solicit contributions from such committee	e.
Full Name (Last, Fin Ms. Pamela Austin T Mailing Address				Date of Receipt	Y
	Suite 700			08 31 200	0 6
City		State	Zip Code	Transaction ID: PR3278120174	
Washington FEC ID number of of federal political com		C	20004-2818	Amount of Each Receipt this Perio	1 1
Name of Employer American Hospital tion-Washingt Receipt For: Primary Other (specify	General		cutive Officer, AONE Year-to-Date ▼ 340.00	P/R Deduction (\$39.00 Bi-Weekly)	
	401 Calvert Street, NW			Date of Receipt	
City	pt. 1008	State	Zip Code	0 8 3 1 2 0 0 Transaction ID: PR3278519174	
Washington		DC	20008-2614	Amount of Each Receipt this Perio	
FEC ID number of of federal political com		C		40.0	1 1
Name of Employer American Hospital A tion-Washingt Receipt For: Primary Other (specify	General A		Policy Development Year-to-Date ▼	P/R Deduction (\$20.00 Bi-Weekly)	
Full Name (Last, Fi	st, Middle Initial)			Date of Receipt	
	25 Seventh Street, NW Suite 700			M M / D D / Y Y Y Y O O O	
City	raite 700	State	Zip Code	Transaction ID: PR3278580174	
Washington		DC	20004-2818	Amount of Each Receipt this Perio	od
FEC ID number of of federal political com		С		80.0	00
Name of Employer American Hospital A tion-Washingt Receipt For:			dent, Political Affairs Year-to-Date ▼		
Primary Other (specify	General	.99.09410	680.00	P/R Deduction (\$39.00 Bi- Weekly)	
SURTOTAL of Recei	ots This Page (optional)			160.0	00

ľ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 77 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 11
2	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may not be name and address of	sold or used by any person any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. John F. Barry			Date of Receipt
	Mailing Address One North Franklin			08 31 2006
	City	·	Code	Transaction ID: PR327877817417
	Millis	MA 60	606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.32
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Execu	tive]
	Receipt For:	Aggregate Year-to	-Date ▼	
	Primary General Other (specify) ▼		708.22	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Richard J. Davidson			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		Code	Transaction ID: PR327942117417
	Washington	DC 20	004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President Emer	itus	
	Receipt For:	Aggregate Year-to	-Date ▼	
	Primary General Other (specify) ▼	0 0 0	680.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
	Mailing Address 204 7th Ave			0 8 3 1 2 0 0 6
	City	•	Code	Transaction ID: PR328136917417
	La Grange	IL 60	525-6406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice Preside	ent, Member Relations	
	Receipt For: Primary General	Aggregate Year-to	-Date ▼	D/D D
	Other (specify)		680.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)			243.32

SCHEDULE A (FECE ITEMIZED RECEIPTS	osc separate sorieduit	ge X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other NAME OF COMMITTEE (In It American Hospital Associ	r than using the name and address of any political comn Full)	nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Ms. Donna J. Melkonian Mailing Address 5545 Nor		Date of Receipt 0 8 3 1 2 0 0 6
City Chicago	State Zip Code IL 60640-1318	Transaction ID: PR328223817417 Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary Gener Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 340.0	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Mr. Calbreith L. Simpson Mailing Address 325 Seve Suite 700	nth Street, NW	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR328224817417
Washington FEC ID number of contributin federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 80.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary Gener Other (specify) ▼	Occupation Regional Executive Aggregate Year-to-Date ▼ 680.0	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Dr. James D. Bentley, Ph.D. Mailing Address 13106 Vi	, 	Date of Receipt 0 8 3 1 2 0 0 6
City	State Zip Code	Transaction ID: PR328224917417
Silver Spring FEC ID number of contributin federal political committee.	MD 20906	Amount of Each Receipt this Period 80.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Vice President Aggregate Year-to-Date ▼	
Primary Gener Other (specify) ▼	55 5	P/R Deduction (\$39.00 Bi- Weekly)
SUBTOTAL of Receipts This P	age (optional)	200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
A 0	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		08 31 YYYY Y 3
	City	State Zip Code	Transaction ID: PR328241417417
	<u>Eagle</u>	ID 83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	55.56
	Name of Employer American Hospital Associa-	Occupation Regional Executive	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	250.02	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack		Date of Receipt
	Mailing Address 3475 North Venice Str	08 31 2006	
	City	State Zip Code	Transaction ID: PR328260917417
	Arlington	VA 22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	160.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Executive Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1360.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade		Date of Receipt
	Mailing Address 1221 Cavalier Road		08 31 YYYY 2006
	City	State Zip Code	Transaction ID: PR328310417417
	Arnold	MD 21012-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President Strategic Co	ommun
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	680.00	P/R Deduction (\$39.00 Bi- Weekly)
Г	NIDTOTAL (D TI: D /)		295.56

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Y)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 104 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and add	diess of any political committee to	Solicit Contributions from Such Committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen			Date of Receipt
Mailing Address 125 Airport Road			0 8 3 1 2 0 0 6
City	State	Zip Code	Transaction ID: PR328312717417
Concord	NH	03301-7300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer New Hampshire Hospital As- sociation	Occupatio Presiden	n t and CEO	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	680.00	P/R Deduction (\$220.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	NW		08 31 2006
City	State	Zip Code	Transaction ID: PR328341817417
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer American Hospital Associa-	Occupatio		
tion-Washingt Receipt For:		Political Action & Grassroot	_
Primary General	Aggregate	e Year-to-Date ▼	D/D Doduction (#20.00 Bi
Other (specify) ▼	0 0	680.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
Mailing Address 200 Clover Hill Cou	rt		0 8 3 1 2 0 0 6
City	State	Zip Code	Transaction ID: PR328511817417
Yardley	PA	19067-5736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		95.20
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	533.20	P/R Deduction (\$39.00 Bi- Weekly)
	<u> </u>		255.20

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 104 (check only one) X
Į.	ny information copied from such Reports and strong ror commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell		Date of Receipt
	Mailing Address 1501 N. Harrison Stre		08 / 01 / 2006
	City <u>Arlington</u>	State Zip Code VA 22205-2726	Transaction ID: PR328512017417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Media Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) Ms. Anne E. Ubl		Date of Receipt
	Mailing Address 801 Pennsylvania Ave #245	08 31 YYYY 2006	
	City	State Zip Code	Transaction ID: PR328767017417
	Washington	DC 20004-2615	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Federal Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	640.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey	1	Date of Receipt
	Mailing Address One North Franklin St	treet	08 31 2006
	City	State Zip Code	Transaction ID: PR329013417417
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional).		120.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 104 (check only one) X
0	ny information copied from such Reports and a r for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address One North Franklin	7.01	08 31 2006
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR329071317417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Officer, C	2
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$39.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	08 31 YYYY 2006	
	City	State Zip Code	Transaction ID: PR329215717417
	Nashville	TN 37210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	680.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Tama Mattocks	1	Date of Receipt
	Mailing Address 1201 Pennsylvania Av 5th Floor	/e, NW	08 31 2006
	City	State Zip Code	Transaction ID: PR330273417417
	Washington	DC 20004-2401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer Strategic Health Care	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	OUDTOTAL of Descripto This Descriptorally		240.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 104 (check only one) X
0	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolates of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca			Date of Receipt
	Mailing Address 4960 138th Cricle Wes	st		08 / 31 / 2006
	City	State	Zip Code	Transaction ID: PR330475417417
	Apple Valley FEC ID number of contributing federal political committee.	C	55124-9229	Amount of Each Receipt this Period 80.00
	Name of Employer American Hospital Associa-	Occupation		
	tion-Chicago Receipt For:	, ' 	Executive	_
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 680.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. Donald Nielsen, MD			Date of Receipt
	Mailing Address 195 Oxford Court			08 31 7 9 9 9
	City	State	Zip Code	Transaction ID: PR330524817417
	Alamo	CA	94507-1753	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vi	n ce President	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		640.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard			Date of Receipt
	Mailing Address 6109 North 9th Road			08 31 2006
	City	State	Zip Code	Transaction ID: PR330534317417
	Arlington	VA	22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt		ssociate Director	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼		340.00	Weekly)
	SUBTOTAL of Receipts This Page (optional)			160.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and s r for commercial purposes, other than using the	Statements may not be sold or used by any pere name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address One North Franklin		08 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330547717417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe	1	Date of Receipt
	Mailing Address 172 Atteridge		08 31 YYYY 2006
	City	State Zip Code	Transaction ID: PR330549217417
	Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Constituency Section	n
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	340.00	P/R Deduction (\$47.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter	I	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	0 8 3 1 2 0 0 6
	City	State Zip Code	Transaction ID: PR330776117417
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	43.48
	Name of Employer American Hospital Associa- tion-Washingt	Occupation V.P., Advocacy & Member Commun	nications
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 304.36	P/R Deduction (\$20.00 Bi- Weekly)
Г	SURTOTAL of Receipts This Page (entional)		123.48

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 104 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
/ А .	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.			Date of Receipt
	Mailing Address PO Box 15587	2: :	7:01	08 / 31 / 2006
	City Austin	State TX	Zip Code 78761-5587	Transaction ID: PR331416017417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70701 3307	83.32
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional	n Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	708.22	P/R Deduction (\$58.00 Bi- Weekly)
— В.	Full Name (Last, First, Middle Initial) Mr. Donald May			Date of Receipt
	Mailing Address 521 Great Falls St.			08
	City	State	Zip Code	Transaction ID: PR331533217417
	Falls Church	VA	22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice Pre-	n sident, Policy	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		660.00	P/R Deduction (\$39.00 Bi- Weekly)
 С.	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW		08 / 31 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR517619717417
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt		sident Executive Branch Rela	ıti
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$39.00 Bi-
	Other (specify) ▼		340.00	Weekly)
s	SUBTOTAL of Receipts This Page (optional) .			203.32
1	,		· · · · · · · · · · · · · · · · · · ·	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 86 / 104
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	13 14 15 16 X 17
	ny information copied from such Reports and Sta for commercial purposes, other than using the n			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
	Mailing Address 1400 G Street, NW			08 31 2006
	City	State	Zip Code	Transaction ID: 12978765
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		359.77
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2693.83	Bank Interest Received

SUBTOTAL of Receipts This Page (optional)	>	359.77
TOTAL This Period (last page this line number only)	• • • • • • • • • • • • • • • • • • •	359.77

	CHEDULE B (FEC FOIIII 3X)	Use separate schedule	s)		check on	IE NUMBER: PAGE 87 / 10)4
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		Ē	21b 27	22 X 23 24 25 28a 28b 28c 29	
	y Information copied from such Reports and S for commercial purposes, other than using the						
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC	,,					
<u>/</u>	Full Name (Last, First, Middle Initial) Friends Of Jay Rockefeller					Transaction ID: 12823406 Date of Disbursement	
	Mailing Address PO Box 1909					088 / 001 / 2006	1
	City Charleston	State Zip Code WV 25327				Amount of Each Disbursement this Pe	erio
	Purpose of Disbursement 2008 Contribution			_	11	1000.00	_
	Candidate Name Sen. John D. Rockefeller, IV	bursement For: 2008	C		egory/ /pe		
	X Senate President	bursement For: 2008 X Primary General Other (specify)	I			2008 Contribution	
	State: WV District: Full Name (Last, First, Middle Initial) Mike Pence Committee					Transaction ID: 12823408	
	Mailing Address P. O. Box 408					Date of Disbursement M8 M / D0 D / Y Y Y O Y O O O	Ý
	City Anderson	State Zip Code IN 46015				Amount of Each Disbursement this Pe	eric
	Purpose of Disbursement Contribution		Tr	0	11	1000.00	_
	Candidate Name Rep. Michael R. Pence		C		egory/ /pe		
	Office Sought: X House Senate President State: IN District: 06	bursement For: 2006 Primary X General Other (specify)	I			Contribution	
	Full Name (Last, First, Middle Initial) Tom Allen For Senate					Transaction ID: 12842117 Date of Disbursement	
	Mailing Address 17 Fairmont St					08 M / 03 / Y 2006 Y	′
	City Portland	State Zip Code ME 04103				Amount of Each Disbursement this Pe	eric
	Purpose of Disbursement Contribution			_	11	2000.00	_
	Candidate Name Mr. Thomas Allen		\perp c		egory/ /pe		
	Office Sought: X House Senate President State: ME District: 01	bursement For: 2006 Primary X Genera Other (specify) ▼	l			Contribution	
	UBTOTAL of Disbursements This Page (option					4000.00	_

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER:	PAGE 88 / 104
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 X 23	24 25 2 28c 29
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	arre and address of any political	Committee to so	iicii continuutions mom s	uch committee
Full Name (Last, First, Middle Initial) Butterfield For Congress Committee			Transaction ID: 12 Date of Disbursemer	
Mailing Address PO Box 2571			08 03	^Y 2006 ^Y
City Wilson	State Zip Code NC 27894		Amount of Each Disk	oursement this Period
Purpose of Disbursement Contribution		011		1000.00
Candidate Name Rep. George K. Butterfield Office Sought: X House Disb	ursement For: 2006	Category/ Type		
Senate President State: NC District: 01	Primary X General Other (specify) ▼		Contribution	
Full Name (Last, First, Middle Initial) Bob Etheridge For Congress Committee	е		Transaction ID: 12 Date of Disbursemer	nt
Mailing Address Post Office Box 2800	1		08 / 03	Ž O Ď 6 Š
City Raleigh	State Zip Code NC 27611		Amount of Each Disk	oursement this Period
Purpose of Disbursement Contribution Candidate Name		011 Category/		2000.00
Rep. Bob Etheridge Office Sought: X House Senate President State: NC District: 02	ursement For: 2006 Primary X General Other (specify)	Туре	Contribution	
Full Name (Last, First, Middle Initial) Walter Jones Committee 2006			Transaction ID: 12 Date of Disbursemen	
Mailing Address PO Box 99667			08 03	Ž O O G
City Raleigh	State Zip Code NC 27624		Amount of Each Disk	oursement this Period
Purpose of Disbursement Contribution Candidate Name		011	L	3000.00
Rep. Walter B. Jones, Jr.		Category/ Type		
Office Sought: X House Senate President State: NC District: 03	ursement For: 2006 Primary X General Other (specify)		Contribution	
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	y Information copied from such Reports and State for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)											
\rangle	American Hospital Association PAC											
	Full Name (Last, First, Middle Initial) Price For Congress Committee					Trans Date		sburs			309 Ž 0 Č	Y
	Mailing Address P. O. Box 1986											
	City Raleigh	State Zip Code NC 27602				Amou	int of	Each	Disb	ursen	nent this	Period
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	Rep. David E. Price			Тур	ory/ e							
	Office Sought: X House Senate President State: NC District: 04	rsement For: 2006 Primary X General Other (specify) ▼				Contr	ibut	ion				
	Full Name (Last, First, Middle Initial)					Trans	acti	on ID:	: 12	8816	S10	
	Virginia Foxx For Congress					Date o	of Di	sburs	emen	t / Y	YY	Y
	Mailing Address P.O. Box 1100					0 8			3		žoŏ	6
	City Clemmons	State Zip Code NC 27012				Amou	int of	Each	Disb		nent this	
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	Rep. Virginia Foxx Office Sought: X House Senate President State: NC District: 05	rsement For: 2006 Primary X General Other (specify)	<u> </u>	Тур	e	Contr	ibut	ion				
	Full Name (Last, First, Middle Initial) Coble For Congress					Trans	of Di	sburs	emen			
	Mailing Address PO Box 1177					8 ^M 0	M	D C	3	/ LY	žoč	6 Y
	City Greensboro	State Zip Code NC 27402				Amou	int of	Each	Disb		nent this	
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	Candidate Name Rep. Howard Coble			ateg Typ	ory/ e							
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	y Information copied from such Reports and Stat for commercial purposes, other than using the na											
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC											
<u> </u>	Full Name (Last, First, Middle Initial) Mike Mcintyre For Congress Mailing Address P.O. Box 1					Date		sburse		88163	36 Ž 0 Ŏ	6 ^Y
	City Lumberton	State Zip Code NC 28359				Amou	ınt of	Each	Disb	urseme	ent this	Period
	Purpose of Disbursement Contribution Candidate Name				gory/	<u> </u>	•	•		. 1	000.00	0
	Rep. Mike McIntyre Office Sought: X House Senate President State: NC District: 07	rsement For: 2006 Primary X General Other (specify)		Ту	pe	Contr	ibuti	ion				
	Full Name (Last, First, Middle Initial) Hayes For Congress Mailing Address Post Office Box 2000					Date		sburse		88163	39 2 0 0	6 Y
	Mailing Address Post Office Box 2000 City	State Zip Code					unt of				ent this	
	Concord Purpose of Disbursement Contribution Candidate Name Robert Hayes	NC 28026		01 ate	gory/	Amou	int Or	Lacii	Displ		500.0	
	· ·	rsement For: 2006 Primary X General Other (specify)	1	- 71		Contr	ibuti	ion				
	Full Name (Last, First, Middle Initial) Hayes For Congress					Date	of Di	sburse	ement	88164		
	Mailing Address Post Office Box 2000					0 8	M /	0	3	Ľ.	žoŏ	6 [*]
	City Concord	State Zip Code NC 28026				Amou	ınt of	Each	Disb		ent this	
	Purpose of Disbursement Contribution			01		L.		-		2	2000.00	D
	Candidate Name Robert Hayes			ate Ty	gory/ pe							
	Office Sought: X House Senate President State: NC District: 08	rsement For: 2006 Primary X General Other (specify)				Contr	ibut	ion				
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American Hospital Association PAC													
Full Name (Last, First, Middle Initial) Sue Myrick For Congress									on ID:	1288	1650)	
Mailing Address P.O. Box 37091								M /	/ D	3 /	Y 2	o ŏ	5 Y
City	Ctata	7in Code					Λ			Diahama			Daviad
City Charlotte	State NC	Zip Code 28237					Amou	nt oi	Eacn	Disburse	-		
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Candidate Name Rep. Sue Wilkins Myrick					egory/ ype								
Senate President	ement For: Primary Other (spe	2006 X General cify) V			· ·		Contri	ibut	ion				
State: NC District: 09						+							
Full Name (Last, First, Middle Initial) Charles Taylor For Congress Committee							Date o	of Di	sburse				
Mailing Address PO Box 2355							8 ^M 0	М	0	3 /	Ý	o ŏ	3 Y
City Asheville	State NC	Zip Code 28802					Amou	nt of	Each	Disburse	emer	t this	Period
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Candidate Name Mr. Charles Taylor			Ca	ate	egory/ ype								
Senate President	ement For: Primary Other (spe	2006 X General cify) V					Contri	ibut	ion				
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Full Name (Last, First, Middle Initial) Charles Taylor For Congress Committee							Date o	of Di	sburse				
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 92 / 104
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check or 21b 27	nly one) 22
Any Information copied from such Reports and Stateme			
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political	Committee to s	solicit contributions from such committee
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Brad Miller For United States Congress			Transaction ID: 12881661 Date of Disbursement
Mailing Address PO Box 10322			0 8 M / D 3 / Y 2 0 0 6
•	State Zip Code		Amount of Each Disbursement this Period
	NC 27605		3000.00
Purpose of Disbursement Contribution		011	3000.00
Candidate Name Rep. Bradley Miller		Category/ Type	
Office Sought: X House Disburser Senate President	nent For: 2006 Primary X General Other (specify)		Contribution
State: NC District: 13			
Full Name (Last, First, Middle Initial) Moran For Kansas			Transaction ID: 12881664 Date of Disbursement
Mailing Address P.O. Box 1151			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
•	State Zip Code KS 67601		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	2000.00
Candidate Name Rep. Jerry Moran		Category/ Type	
Office Sought: X House Senate President State: KS District: 01	nent For: 2006 Primary X General Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			Transaction ID: 12881667
John Spratt For Congress Committee			Date of Disbursement
Mailing Address Post Office Box 10986			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	State Zip Code SC 29731		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	4000.00
Candidate Name Rep. John M. Spratt, Jr.		Category/ Type	
Office Sought: X House Senate President State: SC District: 05	ment For: 2006 Primary X General Other (specify)	••	Contribution
SUBTOTAL of Disbursements This Page (optional)		>	9000.00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LIN			₹:			PA	GE	93 /	104
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NAME OF COMMITTEE (In Full)												
American Hospital Association PAC												
Full Name (Last, First, Middle Initial) Talent For Senate Committee					ransa Date of		-		12881 ent	668		
Mailing Address 9467 Dielman Rock Isla	nd Drive			[0 8 0	1 /	D C	3 3	/ Y	ž	o ŏ	6 ^Y
City Saint Louis	State Zip Code MO 63132			<i>A</i>	Amour	nt of	Each	า Di	sburse	men	t this	Period
Purpose of Disbursement Contribution		01	1							10	00.00)
Candidate Name Mr. James Talent	-	Categ	ory/									
Office Sought: House X Senate President State: MO District:	ement For: 2006 Primary X General Other (specify)	. , , p	<u> </u>	С	ontrib	buti	ion					
Full Name (Last, First, Middle Initial)				Т	ransa	actio	on ID:):	12881	669		
Louise Slaughter Re-Election Committee					Date of	_				· · v	Υ.	Y
Mailing Address P.O. Box 730 C/0 C. Bruce Lawrence					0"8"		٥	ว	J L	2	o ŏ	6
City Honeoye	State Zip Code NY 14471			A	Amour	nt of	Each	n Di	sburse			
Purpose of Disbursement Contribution		01	1				_	•		20	00.00)
Candidate Name Rep. Louise McIntosh Slaughter		Categ Typ	-									
· -	ement For: 2006 Primary General Other (specify)			С	ontrik	buti	ion					
Full Name (Last, First, Middle Initial)				+_					10001			
Sue Kelly For Congress					Date of	f Di	sburs	eme				
Mailing Address PO Box 599					0 ^M 8 ^M		_ C	3] / []	ž	o ŏ	6 [*]
City Katonah	State Zip Code NY 10536			<i>A</i>	Amour	nt of	Each	n Di	sburse	men	t this	Period
Purpose of Disbursement Contribution		01	1	1 L						5	00.00)
Candidate Name Sue Kelly	-	Categ	ory/									
Senate President	ement For: 2006 Primary X General Other (specify)			С	ontrik	buti	ion					
State: NY District: 19												
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	ic and address	ss of any political		-	intico to s	Olio	it conti		0113 111	JIII 340	11 00	JIIIII	iittoo		
Full Name (Last, First, Middle Initial) Badger Fund, The Mailing Address 3000 K Street, NW									sburse	_	816		0 0 0	3 Y	
5th Floor								_							
City Washington	State DC	Zip Code 20007					Amou	nt o	f Each	Disbu	rser	nent	this	Perio	od
Purpose of Disbursement 2006 Contribution Candidate Name			Ca	at	11 egory/		L.	•				50	00.00)	
Badger Fund, The Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General		<u>T:</u>	ype		2006	Cor	ntribut	tion					
Full Name (Last, First, Middle Initial) National Leadership PAC									sburse	ement	838		V	V	
Mailing Address 635 B Pennsylvania Ave	Э.						8 ^M 0	IVI .	1	1 /		Ž	οŏ	3	
City Washington	State DC	Zip Code 20005					Amou	nt o	f Each	Disbu	rser	-			od
Purpose of Disbursement 2006 Contribution				0	11			0			0	100	00.00)	
Candidate Name National Leadership PAC					egory/ ype										
Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General cify) ▼					2006	Cor	ntribut	tion					
Full Name (Last, First, Middle Initial)							Trans			_	838	339			
Hooley For Congress Mailing Address PO Box 2050								of Di	sburse	ement 1	Υ	ž	οŏι	3 ^Y	
City Salem	State OR	Zip Code 97308					Amou	nt o	f Each	Disbu	rser	nent	this	Perio	od
Purpose of Disbursement Contribution				0	11							150	00.00)	
Candidate Name Darlene Hooley			Ca	at	egory/ ype										
Office Sought: X House Disburs Senate President State: OR District: 05	ement For: Primary Other (spe	2006 X General cify) V					Contri	ibut	ion						
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	y Information copied from commercial purpose													;
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	Full Name (Last, First Hulshof For Congr	,									ID: 128 ursement	883841	I	
	Mailing Address	PO Box 1621							8 0 N	M /	11	Y	Ó 0 Ó 6	Y
	City Columbia			tate 10	Zip Code 65205				Amou	int of Ea	ach Disbu			
	Purpose of Disburser Contribution	ment					011	ļ			0 0		500.00	
	Candidate Name Rep. Kenny C. Hu Office Sought: X	Ishof House	Disbursem	ent For:	2006		itegor Type	ry/	-					
		Senate President strict: 09	F	Primary Other (spe	X General				Contr	ibution	ı			
	Full Name (Last, First Barrett For Congre	t, Middle Initial)							1		ID: 128 ursement	883842	2	
		P.O. Box 869 PO Box 869							0 ^M 8	M /	11	Y	Ó 0 Ó 6	Y
	City Westminster	<u> </u>		tate C	Zip Code 29693				Amou	int of Ea	ach Disbu	rsemer	nt this P	'eric
	Purpose of Disburser Contribution	nent					011		L.			30	00.00	-
	Candidate Name Rep. J. Gresham I	Barrett					itegor Type	ry/						
		House Senate President strict: 03		ent For: Primary Other (spe	2006 X General ecify) ▼				Contr	ibution	1			
	Full Name (Last, First Judy Biggert For C	t, Middle Initial)							Date	of Disbu	ID: 128 ursement			_
	Mailing Address	P.O. Box 637							8 0 N	M /	17	2	6 0 0 6	· Y
	City Hinsdale		St IL	tate -	Zip Code 60522				Amou	int of Ea	ach Disbu			_
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	Candidate Name Rep. Judy Biggert						itegor Type	ry/	-					
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	(check on	E NUMBER: PAGE 96 / 104
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28a 28b 28c 29
Any Information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association PAC	iano ana address or any ponioa		Sion communications from Such Committee
Full Name (Last, First, Middle Initial) Kay Bailey Hutchison For Senate Com	mittee		Transaction ID: 12888558 Date of Disbursement
Mailing Address PO Box 9190			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Dallas	State Zip Code TX 75209		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	250.00
Candidate Name Sen. Kay Bailey Hutchison Office Sought: House Disk	ursement For: 2006	Category/ Type	
X Senate President	Primary X General Other (specify) ▼		Contribution
State: TX District: Full Name (Last, First, Middle Initial) Chet Edwards For Congress			Transaction ID: 12888559 Date of Disbursement
Mailing Address PO Box 23273			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Waco	State Zip Code TX 76702		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	250.00
Candidate Name Rep. Chet Edwards		Category/ Type	
Office Sought: X House Disk Senate President State: TX District: 17	ursement For: 2006 Primary X General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial) Friends Of Don Sherwood			Transaction ID: 12906251 Date of Disbursement
Mailing Address 81 Warren Street			08 7 25 7 2006
City Tunkhannock	State Zip Code PA 18657		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution Candidate Name		011	3300.00
Mr. Donald Sherwood		Category/ Type	
Office Sought: X House Disk Senate President State: PA District: 10	ursement For: 2006 Primary X General Other (specify) ▼		Contribution
SUBTOTAL of Disbursements This Page (optio	nal)		3800.00

17	CHEDULE B (FEC Form 3X)	Use sena	arate schedule(s)	_		NUMBER:	P	AGE 97/	104
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	y Information copied from such Reports and Stater for commercial purposes, other than using the name								3
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC		oo o. a., pomaa					<u> </u>	
	Full Name (Last, First, Middle Initial) Friends Of George Allen					Transaction Date of Disb		6255	
	Mailing Address PO Box 6859					08 /	25	žoŏ	3 ^Y
	City Arlington	State VA	Zip Code 22206			Amount of E	ach Disburs		
	Purpose of Disbursement Contribution						1000.00)	
	Candidate Name Mr. George Allen		0000	Catego Typo	-				
	Office Sought: House X Senate President State: VA District: Disburs	ement For: Primary Other (spe	2006 X General ecify) ▼			Contribution	n		
	Full Name (Last, First, Middle Initial) Stupak For Congress					Transaction Date of Disb		6259	
	Mailing Address 817 Ninth Avenue P.O. I PO Box 143	3ox 156				08 4	25	žoŏe	6 Y
	City Menominee	State MI	Zip Code 49858			Amount of E	ach Disburs	ement this	Perio
	Purpose of Disbursement Contribution			011				100.00)
	Candidate Name Rep. Bart Stupak		Catego Typo						
	Office Sought: X House Disburs Senate President State: MI District: 01	ement For: Primary Other (spe	2006 X General ecify)			Contribution	n		
	Full Name (Last, First, Middle Initial) Friends Of Hillary					Transaction Date of Disb	ursement		
						0 8 M	31	žoŏe	3 Y
	Mailing Address 1133 Connecticut Avenu	e Suite 30	0				<u> </u>		
	Mailing Address 1133 Connecticut Avenu City Washington	State DC	Zip Code 20036			Amount of E			
	City Washington Purpose of Disbursement Contribution	State	Zip Code	011				ement this	
	City Washington Purpose of Disbursement Contribution Candidate Name Sen. Hillary Rodham Clinton	State DC	Zip Code 20036	011 Catego Type	ory/				
	City Washington Purpose of Disbursement Contribution Candidate Name Sen. Hillary Rodham Clinton	State	Zip Code 20036 2006 X General	Categ	ory/		ach Disburs		

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ny Information copied fron r for commercial purposes										
NAME OF COMMITTE American Hospital A	E (In Full)									<u> </u>
Full Name (Last, First, Natch Election Com						Date o	action ID: f Disburser	ment	846	
Mailing Address 17	5 South West Temp	ole Suite 650	<u> </u>			0 8	[/] 3	1 / Y	ž 0 (6
City Salt Lake City		State UT	Zip Code 84101			Amou	nt of Each [Disburse		
Purpose of Disburseme Contribution	nt			C)11				1000.	00
Candidate Name Sen. Orrin G. Hatch	Sen. Orrin G. Hatch Type									
x	House Disbu Senate President	Primary Other (spe	2006 X General ecify) ▼			Contri	bution			
State: UT District Di						Trons	action ID:	12077	947	
Georgians For Isaks	,					Date o	f Disburser	ment		(* V
Mailing Address Po	st Office Box 25011	6				0 ^M 8	[/] 3	1 /	ž 0 (6
City Atlanta		State GA	Zip Code 30325			Amoui	nt of Each I	Disburse	ment thi	s Perio
Purpose of Disburseme 2010 Contribution	nt			C)11	<u> </u>			2000.	00
Candidate Name Sen. Johnny Isakson					egory/ ype					
X	Senate President	x Primary Other (spe	2010 General ecify)			2010 (Contributi	on		
Full Name (Last, First, I Fallin For Congress	Middle Initial)						action ID: f Disburser		879	
Mailing Address P(Box 720634					0 ^M 8	/ DO	^D / Y	žοù	6
City Oklahoma City		State OK	Zip Code 73172			Amou	nt of Each I	Disburse	ment thi	s Perio
Purpose of Disburseme	nt)11	<u> </u>			2500.	00
Candidate Name Rep. Mary Fallin				Cat	egory/ ype					
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	y Information copied from such Reports and Stat or commercial purposes, other than using the na					
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC					
<u>/</u>	Full Name (Last, First, Middle Initial) Committee To Re-Elect Vito Fossella					Transaction ID: 12977881 Date of Disbursement
	Mailing Address 34 Dumont Avenue 34 Dumont Ave					08 7 03 7 2006
	City Staten Island	State Zip Code NY 10305				Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		Г	0	11	2000.00
	Candidate Name Mr. Vito Fossella			ate	egory/ /pe	
	Senate President	xsement For: 2006 X Primary General Other (specify)				Contribution
	State: NY District: 13 Full Name (Last, First, Middle Initial)					Transaction ID: 12978777
	Linder For Congress					Date of Disbursement
	Mailing Address P. O. Box 4026					$\begin{array}{c c} & \begin{array}{ccccccccccccccccccccccccccccccccccc$
	City Duluth	State Zip Code GA 30096				Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			_	11	2000.00
	Candidate Name Rep. John Linder				egory/ /pe	
	Office Sought: X House Senate President State: GA District: 07	sement For: 2006 Primary X General Other (specify) ▼				Contribution
	Full Name (Last, First, Middle Initial) Sanford D. Bishop, Jr. For Congress					Transaction ID: 12978780 Date of Disbursement
	Mailing Address P. O. Box 909					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Columbus	State Zip Code GA 31902				Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			0	11	1000.00
	Candidate Name Rep. Sanford D. Bishop, Jr.				egory/ vpe	
	Office Sought: X House Senate President State: GA District: 02	sement For: 2006 Primary X General Other (specify)				Contribution
		I)				5000.00

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\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC												
	Full Name (Last, First, Middle Initial) Porter For Congress					Trans Date o	of Dis	sburse					
	Mailing Address 7840 Red Leaf Drive					0 ^M 8	M /	^D 0	4	/ Y	ž 0 (6	
	City Las Vegas	State Zip Code NV 89131				Amou	nt of	Each	Disb	-	nent thi	-	od
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	Mr. Jon Porter	oursement For: 2006		Туре									
	Senate President State: NV District: 00	X Primary General Other (specify) ▼				Contri	buti	on					
	Full Name (Last, First, Middle Initial) Congressman Joe Barton Committee,	The				Trans Date o	of Dis	sburse			11		
	Mailing Address P.O. Box 1444					0 ^M 8	M /	^D 0	8	/ Y	ž 0 (6	
	City Ennis	State Zip Code TX 75120				Amou	nt of	Each	Disb		nent thi		od
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	Rep. Joe L. Barton Office Sought: X House Senate President State: TX District: 06	oursement For: 2006 Primary X General Other (specify)		Type	•	Contri	buti	on					
	Full Name (Last, First, Middle Initial) Kay Granger Campaign Fund					Trans Date o	of Dis	sburse	emen				
	Mailing Address 715 Jones Street, St	ite 101				0 ^M 8	M /	^D 0	8	/ L	ž 0 (6	
	City Fort Worth	State Zip Code TX 76102	_			Amou	nt of	Each	Disb		nent thi		od
	Purpose of Disbursement Contribution Candidate Name		_	011			•				1000.	υů	-
	Rep. Kay Granger	oursement For: 2006		atego Type									
	Office Sought: X House Senate President State: TX District: 12	Primary X General Other (specify) ▼				Contri	buti	on					
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NAME OF COMMITTEE (In Full)	is and address or any pointed						
American Hospital Association PAC							
Full Name (Last, First, Middle Initial) Chet Edwards For Congress			Transaction ID: 12979413 Date of Disbursement				
Mailing Address PO Box 23273			08 / 08 / 2006				
City Waco	State Zip Code TX 76702		Amount of Each Disbursement this Per	rio			
Purpose of Disbursement Contribution		011	2000.00	_			
Candidate Name Rep. Chet Edwards							
<u></u>	ement For: 2006 Primary X General Other (specify)	. , , p	Contribution				
Full Name (Last, First, Middle Initial)			Transaction ID: 12979414	_			
Kenny Marchant For Congress			Date of Disbursement				
Mailing Address PO Box 110187			08 / 08 / 2006				
City Carrollton	State Zip Code TX 75011		Amount of Each Disbursement this Per	rio			
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Candidate Name Rep. Kenneth Marchant		Category/ Type					
Senate President	ement For: 2006 Primary X General Other (specify)	71-	Contribution				
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Michael Burgess For Congress			Date of Disbursement				
Mailing Address PO Box 2334			08 / 08 / 2006	_			
City Denton	State Zip Code TX 76202		Amount of Each Disbursement this Per	rio			
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Candidate Name Rep. Michael C. Burgess, M.D.		Category/ Type					
	ement For: 2006 Primary X General Other (specify)	1 21	Contribution				
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NAME OF COMMITTEE (In Full)															
American Hospital Association PAC															
Full Name (Last, First, Middle Initial) Pete Sessions For Congress								ion ID		12979 nent	416	5			
Mailing Address PO Box 823047					08 M / 08 / Y 2006 Y										
City Dallas	State Zip Code TX 75382					Amount of Each Disbursement this Period									
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Candidate Name Rep. Pete Sessions		С		tegory/ ype											
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LoBiondo For Congress					Date 0 8	of D	isburs	err 0 3		, , , ,	0 0	Y			
Mailing Address P.O. Box 550 City						Amount of Each Disbursement this Period									
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Purpose of Disbursement Contribution		011	5000.00)				
Candidate Name Rep. Frank A. LoBiondo		С		tegory/ ype											
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Full Name (Last, First, Middle Initial)						T		· ID		10000	054				
Traverse City Golf & Country Club								isburs	em				Y		
Mailing Address 1725 S. Union						0 8		2	2 8	3 / [2	o ŏ	3		
City Traverse City	State Zip Code MI 49864					Amou	ınt o	f Each	n D	isburse	-			od	
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NAME OF COMMITTEE (In Full) American Hospital Association PAC											
Full Name (Last, First, Middle Initial) Merchant Bankcard						of Dis		: 12978 ement			Y
Mailing Address 1601 Elm Street					3.0	3	0	0 4	2	οŏε	5
,	State Zip C TX 7520				Amo	ount of	Each	Disburse	men	t this f	Period
Purpose of Disbursement Bank Fees		Γ	0	01					.1	48.92	2
Candidate Name			Cate	egory/ ype							
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Full Name (Last, First, Middle Initial)								: 12978	767	,	
Citibank, F.S.B. Mailing Address 1400 G Street, NW					Date 0 8	of Dis		ement D / Y	ž	0 ŏ 6	S Y
•	State Zip C				Amo	ount of	Each	Disburse	men	t this f	Period
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Full Name (Last, First, Middle Initial) American Express						saction		: 12978	770)	
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Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General			Banl	< Fee	S				
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		y Information copied from such Reports and State for commercial purposes, other than using the na			, ,						
	\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC									
Α.		Full Name (Last, First, Middle Initial) Mr Mark B Carter Mailing Address 200 Abraham Flexner \		Transaction ID: 12988081 Date of Disbursement							
		City Louisville		Amount of Each Disbursement this Period							
		Purpose of Disbursement Refund		010	600.00						
		Candidate Name	Category/ Type								
		Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼		Refund						
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